

# **Accreditation Primer Report**

## **UPEI Health & Wellness Centre**

Charlottetown, PE

On-site survey dates: December 5, 2022 - December 8, 2022

Report issued: January 6, 2023

## **About the Accreditation Primer Report**

UPEI Health & Wellness Centre (referred to in this report as "the organization") is participating in Accreditation Canada's Accreditation Primer program. As part of this ongoing process of quality improvement, an on-site survey was conducted in December 2022. Information from the on-site survey was used to produce this Accreditation Primer Report.

Accreditation Primer results are based on information provided by the organization. Accreditation Canada relies on the accuracy of this information to plan and conduct the on-site survey and produce the Accreditation Primer Report.

## **Confidentiality**

This report is confidential. Accreditation Canada only provides it to the organization; it is not released to any other parties.

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

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

## **A Message from Accreditation Canada**

On behalf of the Board of Directors of Accreditation Canada, I would like to extend my sincere congratulations to your Board, your leadership team, and your staff on your participation in the Accreditation Primer. As the first step in your quality journey with Accreditation Canada, I am confident that the process will be helpful in identifying strengths and areas where your organization can focus its quality and safety improvement efforts. The Accreditation Primer is how organizations begin to realize the full value of our Qmentum program.

Attached for your review is your Accreditation Primer Report, which includes the accreditation decision and the final results from your organization's on-site survey. The information in this report, as well as your online Quality Performance Roadmap, is designed to guide your organization's quality improvement activities.

Thank you for your leadership and for demonstrating your ongoing commitment to quality by partnering with Accreditation Canada on your quality journey.

As always, your feedback is welcome. We too are focused on improvement, and your input provides us with an opportunity to strengthen our program to ensure that it remains relevant to your organization.

Should you have any questions, your Program Manager or Client Services Coordinator is available to assist you.

I look forward to our continued partnership.

Cester Thompson

Sincerely,

Leslee Thompson Chief Executive Officer

## **Table of Contents**

1
1
2
3
4
5
8
9
9
10
11
12
13
14
15
16
19
21
22
23

## **Executive Summary**

UPEI Health & Wellness Centre (referred to in this report as "the organization") is participating in the Accreditation Canada Accreditation Primer program. This is the first step on its quality improvement journey with Accreditation Canada—an independent, not-for-profit organization that sets standards for quality and safety in health care and accredits health care organizations in Canada and around the world.

The Accreditation Primer program involves an evaluation of the quality and safety of the organization's programs and services. Following a comprehensive self-assessment, external peer surveyors conducted an on-site survey during which they assessed the organization against Accreditation Canada standards. The results are included in this report and were considered in the accreditation decision.

This report shows the results to date and is provided to guide the organization as it continues to incorporate quality improvement principles into its programs, policies, and practices. At this point, we congratulate the organization and encourage it to continue its journey to begin the Qmentum program.

The organization is commended on its use of accreditation to improve the services it offers to clients and the community.

### **Accreditation Decision**

UPEI Health & Wellness Centre's accreditation decision is:

#### **Proceed**

The organization has achieved Accreditation Primer Award and is ready to move into Qmentum. Accreditation Canada recommends that the organization create a plan to address any of the items identified with red and yellow flags.

## **About the On-site Survey**

• On-site survey dates: December 5, 2022 to December 8, 2022

#### • Location

The following location was assessed during the on-site survey.

1. UPEI Health & Wellness Centre, 2nd floor North, Murphy Centre

#### • Standards

The Primer Standards were used to assess the organization's programs and services during the on-site survey:

1. Primer - Service Excellence Standards

#### Instruments

The organization administered:

1. Canadian Patient Safety Culture Survey Tool: Community Based Version

## **Overview by Quality Dimensions**

Accreditation Canada defines quality in health care using eight dimensions that represent key service elements. Each criterion in the standards is associated with a quality dimension. This table shows the number of criteria related to each dimension that were rated as met, unmet, or not applicable.

Quality Dimension	Met	Unmet	N/A	Total
Population Focus (Work with my community to anticipate and meet our needs)	2	0	0	2
Accessibility (Give me timely and equitable services)	2	0	0	2
Safety (Keep me safe)	33	0	0	33
Worklife (Take care of those who take care of me)	7	1	0	8
Client-centred Services (Partner with me and my family in our care)	13	0	0	13
Continuity (Coordinate my care across the continuum)	3	0	0	3
Appropriateness (Do the right thing to achieve the best results)	29	0	0	29
Total	89	1	0	90

## **Overview by Standards**

The Accreditation Primer is an opportunity for the organization and Accreditation Canada to work together to establish the supports, structures, and processes necessary for accreditation, with a particular focus on the fundamental elements of quality and safety. Accreditation Canada's programs use national standards to assist organizations in improving the quality and safety of their services. Results from on-site surveys are used by the organization to identify areas for improvement and determine priorities for action.

The Accreditation Primer standards identify policies and practices that contribute to high-quality, safe, and effectively-managed care. This table shows standards used to evaluate the organization's programs and services, and the number and percentage of criteria that were met, unmet, or not applicable during the onsite survey.

	Total Criteria		
Standards Set	Met	Unmet	N/A
	# (%)	# (%)	#
Primer	89 (98.9%)	1 (1.1%)	0
Total	89 (98.9%)	1 (1.1%)	0

## **Summary of Surveyor Team Observations**

The surveyor team made the following observations about the organization's overall strengths, opportunities for improvement, and challenges.

The University of Prince Edward Island Health and Wellness Centre (the Centre) is commended for engaging in Accreditation Canada's Primer. During the initial hours of the on-site visit there was some nervousness about the accreditation process and yet an obvious pride in the quality of health services and programs being delivered. This committed and progressive team were very open to an assessment of their organization with a set of national standards of excellence in order to improve the quality and safety of their services.

While a meeting with the Board of Governors was not held, the surveyor and Director met with the Vice President Administration and Finance (VPAF), who reports directly to the President and Vice Chancellor, to begin the site visit. The VPAF was fully engaged, proud of the Centre team and their contribution to the health and wellbeing of the university community and supportive of the accreditation process. She is passionate about her role in ensuring quality services are delivered and maintaining a safe environment for those who learn and work at UPEI.

It is important for the Board to hear about and be aware of any client or staff incidents, safety concerns and risks as well as any relevant stories, experiences and achievements involving the Centre.

The Centre Director (a highly skilled and experienced surveyor with Accreditation Canada) spent considerable time and energy in ensuring the necessary foundational documents, policies and processes were created in the months leading up to the on-site visit. She also ensured staff understood and were familiar with the basic accreditation themes, processes and on-site expectations. She is highly respected throughout the Centre, the campus and in the broader community for transforming the organization. The Director exudes a positive, can do attitude and is strategic and organized in her approach to leading this organization.

The Centre has a well-developed Strategic Framework (2020-2023) including Mission, Vision, Core Values and five strategic priories: Service Delivery, Comprehensive Services, Health Promotion and Illness Prevention, Community Impact, and Healthy and Sustainable Organization. As this document is updated it is suggested the organization consider the importance of Equity, Racism, Diversity and Inclusion in health. Examining their work and workforce given the clients and families they will serve into the future is essential. This may mean new ways of insuring representation and input.

The Centre has developed good relationships with many University departments including Counselling, Facilities Management, Student Services, Psychology, Security, Atlantic Veterinary College and Accessibility.

Most of the staff at the Centre are linked to the broader community at many levels. They have deep community and professional connections on campus, in Charlottetown, across the Island and throughout

Canada. These range from community engagement and health promotion, to regulatory bodies, clinical experts and colleagues.

The PEI provincial departments of Health and Wellness and Social Development and Housing have partnered with the Centre to create a provincial demonstration program for assessment and treatment of undiagnosed attention deficit hyperactivity disorder (ADHD) in adults. Staff and a physician housed at the Centre are working in the ADHD program are recognized as having a provincial role in many cases and provide timely assessment, care planning, treatment and supports. It is hoped this program will receive core funding.

The highly skilled, knowledgeable and dedicated staff are proud of the care and services they are providing to clients and families. For many student clients they go back and forth between services back home and here at the university. For many it is their first time managing their health concerns without a parent involved. Staff are very patient and do lots of explaining during their visits. I suspect many parents never hear about this but would be grateful.

They are clearly passionate about the work they do. The team is collegial and work well together. Most are working to the top of their scope of practice however both the RN and LPN roles could be enhanced. There is a strategic approach to electronic record systems /documentation that supports front line care. There are potential opportunities with the existing systems that could be explored. For example, running reports to inform service design.

This team is also innovative. An example is the STI self screening tools and follow-up. This initiative should be considered for a leading practice and/or research project.

There were numerous examples showing the client/family are the focus of the Centre's activities. Services are client focused. Staff and physicians are very engaged. This is an ideal environment for health care learners.

With the future introduction of a new medical school on campus there is some trepidation amongst staff and leadership. This is an ideal opportunity to participate in a truly multidisciplinary learning environment. Ensuring the voice of the Centre Director at decision tables will be critical to achieve this.

The organization has a 2020- 2023 Strategic Plan complete with a Strategic Framework including A Vision, Mission, Core Values and five Strategic Priorities: Service Delivery, Comprehensive Services, Health Promotion and Illness Prevention, Community Impact, and Healthy and Sustainable Organization. Plans to update the Plan are being discussed.

There is a quality improvement framework and approach that is strongly linked to and supportive of the vision, mission, core values and strategic priorities. Quality and risk management has been incorporated into the Centre's activities. Next steps could include action plans for service and support areas. There a commitment to providing quality improvement education and training. A future challenge is to efficiently collect meaningful data and analyse it to determine if the organization is moving in the right direction.

An Ethical Framework has been developed and supported throughout the Centre. The organization is encouraged to chose several likely ethical scenarios and have staff work through them. If there is an opening on the University Ethics Committee it might be worth while to have an interested staff member join or sit there ex-officio.

The future will likely bring a need for more mental health services. Currently there are mental health supports offered at several different areas of the campus. This could be a potential opportunity.

UPEI values their employees and provides them with health & safety and risk management supports to protect against undue personal and professional risk. There is a commitment by the Centre to provide a blame free, safe and healthy work environment and culture, optimize a learning environment. Continuing Education is embraced, with online learning, on-site workshops, s well as off-site conferences/courses available to staff.

Client satisfaction with care and services is very high. The team undertakes client satisfaction surveys and these consistently demonstrate positive results. There is a process for responding to comments and suggestions which is valued by clients and families

It has been a privilege to visit the UPEI H&W and its Primary Care Program. It is clear they have outstanding staff, leadership and partnerships. This has allowed them to make many positive changes to their organization and culture in a short amount of time. These improvements have positioned UPEI H&W for success.

This Primer survey visit has highlighted numerous areas of excellence and a few ideas to consider. Given their past and current achievements this surveyor has a high degree of confidence they will succeed and thrive in the QMENTUM cycle.

## **Detailed On-site Survey Results**

This section provides the detailed results of the on-site survey. Results are presented by priority process and standard set.

Accreditation Canada defines priority processes as critical areas and systems that have a significant impact on the quality and safety of care and services. Priority processes provide a different perspective from that offered by

the standards, organizing the results into themes that cut across departments, services, and teams.

For instance, the episode of care priority process includes criteria from a number of sections in the Accreditation Primer standards that address various aspects of client care. These include intake or admitting, assessment, service planning, service delivery, follow up, and transitions. This provides a comprehensive picture of the care clients receive as they move through the organization.

During the on-site survey, surveyors rate the organization's compliance with the criteria, provide rationale for the rating, and comment on each priority process.

Priority process comments are below. The rationale for unmet criteria can be found in the organization's online Quality Performance Roadmap.

### **Priority Process Results for System-wide Standards**

The results in this section are presented first by priority process and then by standards set.

Some priority processes in this section also apply to the service excellence standards. Results of unmet criteria that also relate to services should be shared with the relevant team.

### **Priority Process: Planning and Service Design**

Developing and implementing infrastructure, programs, and services to meet the needs of the populations and communities served.

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

Planning and Service Design

The organization completed a strategic planning exercise and subsequently developed their Strategic Framework 2020-2023 complete with Vision, Mission, Core Values and 5 Strategic Priorities, Service Delivery, Comprehensive Services, Health Promotion and Illness Prevention, Community Impact, and Healthy and Sustainable Organization.

These components guide the organization's planning and service design. As the team updates this excellent framework document, they are encouraged to ensure there is input from a variety of clients and their families, staff, and community partners

The UPEI Health and Wellness 2022 Operational Plan contains relevant information on the goals, objectives, activities, time frame and responsibilities for each initiative. Some of this work has been delayed due to the pandemic. The plan is reflective of the organizational plans for expanding primary health care programming.

It is suggested that the organization consider on providing written reports to the Board of Governors via the Vice President, Administration and Finance to link this progress on achieving strategic objectives and other initiatives such as undertaking a Primer survey with Accreditation Canada.

### **Priority Process: Human Capital**

Developing the human resource capacity to deliver safe, high quality services.

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

Staff working in the Health and Wellness Centre are employees of UPEI Health & Wellness Centre. The organization has a staff complement of both full time permanent and some term positions who provide a variety of health and wellness programs and services.

All credentials and annual renewals are reviewed and documented. Training is up to date and appropriate to the profession as well as the scope of practice.

Front line staff are engaged with their colleagues in the workplace, are well connected and received positively in the university community. Although there have been a few recent new hires there is generally low staff turnover.

The employer is recognized for a comprehensive human resource program which has been recently updated to an on-line system. At the administrative building on campus, the administration of personnel files is taken place. Human resources staff are readily accessible to management and staff.

Supervisors and HR staff work together to fill vacancies and update Job Fact Sheets. There are standard operating procedures for hiring staff and students. Probation requirements are union dependent.

The organization has policies on working alone and workplace violence. There is an active Workplace Wellness Committee.

Performance reviews are due in December and are currently not up to date. The organization is encouraged to make this a priority.

Staff members appreciate that leaders recognize their heavy workload and are proud of the quality of work produced. Attention to work life balance is encouraged to maintain a healthy and productive workforce.

### **Priority Process: Integrated Quality Management**

Using a proactive, systematic, and ongoing process to manage and integrate quality and achieve organizational goals and objectives.

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

The organization's mission, vision and values are visible throughout the Centre. An ethical decision-making framework has been developed and distributed. Front-line clinicians and support staff use it to identify and address ethical issues in the work environment. There is evidence the tool has been used and assisted in the resolution of issues.

There is evidence of a well integrated culture of quality and safety in the organization. An integrated Quality Risk Management Plan has been developed and brings together all the elements of the risk management, safety and quality improvement activities which are in place in the organization.

The UPEI Health and Wellness team has identified potential risks for the organization and is encouraged to continue their work on prioritizing and mitigating the risks as their programs and space evolve.

There is a cultural value placed on the use of evidence and best practice that is evident throughout the organization. Staff attend conferences, take courses and network to stay current. Innovation is supported by the organization policies and procedures which are based on best practices and the organization completes environmental scans to assist it in decision-making.

The organization is recognized for their 2019 Community Needs Assessment and are encouraged to repeat it as time and funding allow.

The Quality team is energetic, committed, and eager to build capacity in the organization. They seek perspectives from several different groups on campus. They report feeling valued, their perspectives heard, and their suggestions taken seriously and implemented where possible.

All these activities support the team as they emerge as leaders in Canadian University Health and Wellness.

### **Priority Process: Physical Environment**

Providing appropriate and safe structures and facilities to achieve the organization's mission, vision, and goals.

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

The UPEI Health and Wellness Centre (and other campus facilities) seen on this visit are clean, properly ventilated, secure, free of clutter, well maintained and meet all relevant codes. UPEI Facilities Management are responsible for custodial services, air quality, safe work environments, repairs, and seasonal care. Adequate hand sanitizer, cleaning sprays and wipes were observed in high touch areas.

Exits are clearly marked and clear of obstructions.

The organization has invested in background music in the clinical areas, on the suggestion of clients, in areas where there are many people in close proximity interacting with clients face to face, via telephone or virtual care. This could increase privacy for both providers and clients.

The organization has added several new programs and staff in recent years and space is at a premium. As they continue to expand along with the opening of a new medical school they are encouraged to plan for adequate space into the future.

Regular inspections of the physical environment are conducted with safety and/or maintenance issues identified and repaired, removed, replaced, or modified. Fire extinguishers are up to date.

There is an up-to-date preventative maintenance program with work orders sent automatically and triaged. Staff members have the required training for Workplace Hazardous Materials Information System.

The organization is commended for a robust disaster and emergency preparedness plan.

### **Priority Process: Emergency Preparedness**

Planning for and managing emergencies, disasters, or other aspects of public safety.

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

UPEI Health and Wellness is part of the robust emergency preparedness plan of the University. There are standardized documents, streamlined templates and assessment tools. They have clearly described three emergency levels. The organization is encouraged to review these documents regularly and update them as required.

The organization is recognized for their fire safety plans, pandemic response plan, which along with policies and procedures regarding outbreaks, are compliant with legislation, guidelines and protocols set by the Ministry and Public Health.

The organization is commended for their UPEI Safe App which most students and staff have downloaded and use. This app can send notification of campus closures and safety issues in event of an emergent event or if a significant number of employees are unable to report for work.

The organization experienced a power outage and damage during Hurricane Fiona with important lessons learned and improvements made.

Their latest regular drill was held in December 2021. A campus wide fire drill is planned for winter 2023.

UPEI Health & Wellness Centre has their own internal Safety and Security team. They are well trained and are available to do wellness checks on campus. The reception area and most offices in the UPEI Health & Wellness Centre have panic buttons.

The organization is commended for their progress in having the people, skills, and infrastructure in place to respond to emergencies.

### **Priority Process: Medical Devices and Equipment**

Obtaining and maintaining machinery and technologies used to diagnose and treat health problems.

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

The UPEI Health & Wellness Team has standardized medical devices and equipment throughout the clinical areas. Team members receive training for applicable medical equipment and devices on orientation and ongoing as required. All medical equipment and devices are accompanied with instructions and procedure manuals which are easily accessed by staff.

The process for selecting and purchasing medical devices and equipment are understood by management and staff. The organization does not borrow or lease any medical devices.

Equipment, furniture, and surfaces are cleaned with a hard surface cleaner and disinfectant wipe after each patient encounter.

The organization stocks mostly single use products and sends some small instruments to the Atlantic Veterinary College (AVC) for reprocessing. There is no reprocessing of single use medical equipment or devices.

Clear and concise policies and procedures are developed and maintained for cleaning, disinfecting, and sterilizing reusable medical devices. Storage and transportation of reprocessed medical equipment and devices meets all applicable criteria.

Nearly all the equipment used is designed to operate without adjustment or calibration. When necessary, the AVC conducts annual calibration. Batteries are changed as recommended. The vaccine fridge temperature is monitored as per standards and is alarmed. The Automated External Defibrillator (AED) is located in the stairwell leading to the Health and Wellness Centre.

There is a concise equipment list with make and model, usage, care, and maintenance frequency.

There are preventive maintenance reports for medical devices and equipment.

### **Service Excellence Standards Results**

The results in this section are grouped first by standards set and then by priority process.

Priority processes specific to service excellence standards are:

#### **Infection Prevention and Control for Primer**

• Implementing measures to prevent and reduce the acquisition and transmission of infection among staff, service providers, clients, and families

#### **Medication Management for Primer**

• Using interdisciplinary teams to manage the provision of medication to clients

#### Competency

• Developing a skilled, knowledgeable, interdisciplinary team that can manage and deliver effective programs and services.

#### **Episode of Care**

• Partnering with clients and families to provide client-centred services throughout the health care encounter.

#### **Decision Support**

• Maintaining efficient, secure information systems to support effective service delivery.

#### **Standards Set: Primer - Direct Service Provision**

#### **Unmet Criteria**

#### **Priority Process: Competency**

4.9 Team member performance is regularly evaluated and documented in an objective, interactive, and constructive way.

#### **Priority Process: Episode of Care**

The organization has met all criteria for this priority process.

#### **Priority Process: Decision Support**

The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

#### **Priority Process: Competency**

The clinical and support staff mix is appropriate for the clientele served. Clients are pleased with the amount of time providers can spend with them. The organization is commended for a model which allows and encourages this level of service.

UPEI Health & Wellness Centre is recognized for their interdisciplinary team which plans, works, and learns together.

Current position profiles reflect the role, responsibilities, and requirements for the position. All staff interviewed reported a comprehensive orientation but having had a recent performance review was not consistent.

There are many opportunities for training and professional development and leadership is encouraged to continue with these efforts.

UPEI Health & Wellness Centre is encouraged to ensure team members are working to the top of their scope of practice and continue to share care when appropriate and or necessary.

#### **Priority Process: Episode of Care**

The UPEI Health and Wellness Centre team is acknowledged for the many evidence-based services offered in their program area.

The atmosphere at the Centre is described by clients as welcoming, friendly, accepting, kind, responsive and they are most grateful for this.

The team is commended for their ability to plan and work both together and with partners to improve care and communication for their clients.

Their primary clients are UPEI Health & Wellness Centre and the Atlantic Veterinary College (AVC) students, faculty and staff, and their immediate family members. They also accept unaffiliated prenatal clients from the larger community.

The organization is responsive and can often provide same day, next day access when needed. Clinicians are flexible with their administrative obligations to accommodate clients.

Complete medical assessments are found in the EMR including up-to-date medication profiles and updated allergies are noted. Results of diagnostic tests are received in a reasonable time with notification of critical values by phone. There is always someone available to take these calls.

There is an out of office message on the phone line directing clients to other resources. The team is encouraged to use an out of office email bounce back for people who are emailing out of regular hours.

The team is encouraged to continue to help clients and families to navigate the health care system and support them as they advocate for self-care and self-management. Staff are recognized for embracing diversity and offering Gender Affirming Care.

Clients interviewed are very satisfied with the care they receive including assessment and exam, results of tests, screening, and plans for follow-up. This comprehensive and compassionate care was also observed throughout the on-site visit.

Clients interviewed were aware of their right to make a complaint and although they had none, were confident any issues would be dealt with quickly. The comment box in the lobby is a welcome addition for those who wish to remain anonymous.

The team works with partners to remove barriers and increase timely access to specialist services. They work diligently to address community health issues and are encouraged to devote some of their energy to upstream work such as safe housing or food security if time allows.

Team members have completed Applied Suicide Intervention Skills and Mental Health First Aid training and are able to meet the immediate safety needs when clients are identified as being as risk for suicide. They assess suicide risk using evidence-based screening tools.

Team members understand the processes for dealing with ethical issues and complaints. Privacy is protected when using the Electronic Medical Record (EMR) during client encounters. Team members make formal and informal referrals depending on the issue and client situation. They are commended for finding creative ways to engage and support high priority populations.

#### **Priority Process: Decision Support**

Team members at UPEI Health & Wellness have access to and use information, research and evidence informed best practices to make the best possible clinical decisions for their clients. This information is used to help inform, guide assessment, treatment, and care planning.

Primary Care providers use an Electronic Medical Record (EMR). Client records have accurate, up-to-date record documenting assessments, screening, treatment, consultation, and referral notes for the services provided.

This very busy clinical team is encouraged to be available for reflection on current research, best practice information.

### **Priority Process: Infection Prevention and Control for Primer**

Implementing measures to prevent and reduce the acquisition and transmission of infection among staff, service providers, clients, and families

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

Everyone at UPEI Health and Wellness knows they play an integral role in preventing the spread of infections. Team members are well informed regarding microbiology, infection prevention and control, chain of infection, policies, practices, and processes on orientation and as needed. Staff immunizations rates are high.

Staff, clients, and visitors are encouraged to mask, if possible, exercise cough etiquette, distance where feasible and practice adequate hand hygiene. Team members who are ill are encouraged or asked to stay at home and seek medical care if required.

The organization is commended for their hand hygiene audits and for sharing the results with clients and the public as observed in a display in the waiting area. They are encouraged to continue them on a regular basis.

UPEI H&W has the appropriate Infection Prevention and Control (IPAC) policies and procedures for an organization of its size and mandate. Infection Prevention and Control activities at the Centre are based on a continuous quality improvement approach where the processes and outcomes are continuously reviewed and improved.

Clients, visitors, and team members were frequently observed practising appropriate hand hygiene. Due to modified COVID-19 precautions were masks in public areas and when moving through the building. The organization provides PPE for those who need it.

Fridges that house medications, vaccines or specimens do not house food or drinks. The vaccine fridge is monitored and checked twice daily.

COVID-19, influenza and rabies are the three most common vaccines given in the Centre. Other vaccines are also available at the clinic.

There is a standard process to ensure the safe handling of sharps with education for applicable team members. The organization is encouraged to use safety-engineered needles and syringes to reduce the risk of injury.

The organization works with provincial Public Health with regards to outbreaks, confirmation of health protection measures, receives advice on complex cases. The organization is acknowledged for their STI and HIV self screening initiatives.

Cleaning and disinfection of client service areas occurs between each encounter with reception and other areas cleaned on a regular schedule and as needed. The organization's housekeeping/custodial staff are commended for the cleanliness of both the clinical and administrative area of the Centre. Everyone at UPEI Health and Wellness knows they play an integral role in preventing the spread of infections. Team members are well informed regarding microbiology, infection prevention and control, chain of infection, policies, practices, and processes on orientation and as needed. Staff immunizations rates are high.

Staff, clients, and visitors are encouraged to mask, if possible, exercise cough etiquette, distance where feasible and practice adequate hand hygiene. Team members who are ill are encouraged and/or asked to stay at home and seek medical care if required.

The organization is commended for their hand hygiene audits and for sharing the results with clients and the public as observed in a display in the waiting area. They are encouraged to continue them on a regular basis.

UPEI H&W has the appropriate infection prevention and control (IPAC) policies and procedures for an organization of its size and mandate. Infection Prevention and Control (IPAC) activities at the Centre are based on a continuous quality improvement approach where the processes and outcomes are continuously reviewed and improved.

Clients, visitors, and team members were frequently observed practising appropriate hand hygiene and due to modified COVID-19 precautions were masks in public areas and when moving through the building. The organization provides PPE for those who need it.

Fridges that house medications, vaccines or specimens do not house food or drinks. The vaccine fridge is monitored and checked twice daily.

COVID-19, influenza and rabies are the three most common vaccines given in the Centre. Other vaccines are also available at the clinic.

There is a standard process to ensure the safe handling of sharps with education for applicable team members. The organization is encouraged to use safety-engineered needles and syringes to reduce the risk of injury.

The organization works with provincial Public Health with regards to outbreaks, confirmation of health protection measures, receives advice on complex cases. The organization is acknowledged for their STI and HIV self screening initiatives.

Cleaning and disinfection of client service areas occurs between each encounter with reception and other areas cleaned on a regular schedule and as needed. The organization's housekeeping and custodial staff are commended for the cleanliness of both the clinical and administrative area of the Centre.

### **Priority Process: Medication Management for Primer**

Using interdisciplinary teams to manage the provision of medication to clients

#### The organization has met all criteria for this priority process.

#### Surveyor comments on the priority process(es)

The team establishes and updates the medication profile for each patient in the Electronic Medical Record (EMR), including Best Possible Medication History (BPMH) and medication reconciliation. Medication reviews are completed regularly. There is also evidence of client teaching with regards to medications.

Most team members have access to up-to-date medication guideline. The organization is encouraged to provide this resource to all those who administer medications.

Stock STI meds, and emergency medications are checked regularly for expiry dates and integrity. There are no sample medications in the Centre. STI Medications are actually locked up.

Allergies are clearly documented and confirmed with clients.

Team members administer vaccines to children's and adults according to the Prince Edward Island Public Health vaccination schedule and guidelines. The organization has a well-defined process for the administration of influenza and other vaccines They are safely stored separately from other medications with cold chain monitoring checked twice a day. Staff are aware of their responsibility to monitor, report, investigate and review adverse vaccine related events.

Although there have not been any adverse systemic events following Immunization, the AEFI process is well understood.

Currently there are medications brought from home for administration in the Centre. The provider and the client assess these medications is informed of any risk.

The organization has identified and implemented a list of abbreviations that are not to be used. None were observed on this visit.

Prescriptions are created electronically and sent directly to the client's pharmacy of choice.

## **Organization's Commentary**

After the on-site survey, the organization was invited provide comments to be included in this report about its experience with Qmentum and the accreditation process.

The Accreditation report provides a good overview of the services of the UPEI Health & wellness Centre. The team is proactive, client-centered and continuously looking for ways to improve and that is captured within the report. Using the Accreditation Standards has assisted us to improve our quality and provided a blueprint to follow as we review our services. The team is currently reviewing the results and will action those in the coming months. The next steps will include preparing for a full onsite survey over the next 24 months.

## **Appendix A - Accreditation Primer**

Health care accreditation contributes to quality improvement and patient safety by enabling a health organization to regularly and consistently assess and improve its services. The Accreditation Primer program offers a customized process aligned with each client organization's needs and priorities.

As part of the Accreditation Primer process, organizations complete a Self-Assessment, have the option of completing and submitting survey instrument data, and undergo an on-site survey during which trained peer surveyors assess their services against national standards. The surveyor team provides preliminary results to the organization at the end of the on-site survey. Accreditation Canada reviews these results and issues the Accreditation Primer Report within 15 business days.

An important adjunct to the Accreditation Primer Report is the online Quality Performance Roadmap (QPR), available to the organization through its portal. The organization uses the information in the QPR in conjunction with the Accreditation Primer Report to develop comprehensive action plans.

Throughout the Accreditation Primer program, Accreditation Canada provides ongoing support to help the organization address issues, develop action plans, and monitor progress.

## **Action Planning**

Following the on-site survey, the organization uses the information in its Accreditation Primer Report and QPR to develop action plans to address areas identified as needing improvement. The organization uses this information to make continuous quality improvements so it can begin the Qmentum program.