

TO: Chair and Members of the Governance Committee

FROM: Christopher Mackie, Medical Officer of Health / CEO

DATE: 2018 November 15

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## ACCREDITATION AND CONTINUOUS QUALITY IMPROVEMENT

### Recommendation

*It is recommended that the Governance Committee:*

- 1) ***Receive Report No. 012-18GC re: “Accreditation and Continuous Quality Improvement” for information;***
- 2) ***Recommend that the Board of Health not pursue accreditation at this time; and***
- 3) ***Recommend that the Board of Health request an additional report in 2020 to reconsider the costs and benefits of pursuing accreditation with an external body.***

### Key Points

- In accordance with the Ontario Public Health Standards (OPHS), the Board of Health is responsible for ensuring a culture of quality and continuous organizational self-improvement.
- Accreditation is not mandated for public health units. Accreditation is one option/strategy for assessing and ensuring compliance with organizational and governance best practices and for promoting a culture of continuous quality improvement (CQI).
- The Middlesex-London Health Unit is not currently accredited. For fifteen years, MLHU was accredited under the Ontario Council on Community Health Accreditation (OCCHA), until OCCHA ceased operations in 2013.

### Background

Accreditation is an external review process that evaluates a public health unit against a set of standards. The Middlesex-London Health Unit had been accredited previously under the Ontario Council on Community Health Accreditation (OCCHA). In March 2013, the Ministry of Health and Long-Term Care (MOHLTC) ended a funding arrangement with OCCHA, and OCCHA ceased operations. Since 2013, the Ministry has undertaken initiatives to build and implement its support for quality improvement. The Ministry maintains support for voluntary accreditation under one of the two national accreditation bodies, Accreditation Canada and Excellence Canada, recognizing the potential benefits for local public health units.

### Board of Health Accountability for Quality

In accordance with the Ontario Public Health Standards (OPHS) for Effective Public Health Practice, the Board of Health is responsible for ensuring a culture of quality and continuous organizational self-improvement that encompasses programs, services, and public health practice. This *may include*:

- a) Identification and use of tools, structures, processes, and priorities to measure and improve the quality of programs and services;
- b) Measurement of client, community, community partner, and stakeholder experience;
- c) Routine review of outcome data; and
- d) Use of external peer reviews, such as accreditation.

Currently, MLHU has several processes in place to satisfy the requirements of this standard, including the Balanced Scorecard, the MOHLTC Annual Service Plan, MLHU annual budget reporting, the Planning and Evaluation Framework, the Client and Community Partner Experience Project, and the Community Health Status Resource.

### **Update on Accreditation**

In October 2018, MLHU staff conducted an environmental scan to determine the level of accreditation involvement across other Ontario public health units, the perceived value of accreditation, and key considerations. Responses were received from nearly half of the thirty-six public health units. Of those who responded, less than half rated the accreditation process as extremely valuable in advancing quality at their organization, and only a quarter of respondents indicated that their organization was extremely likely to participate in an accreditation program in the future.

Key considerations were consistent with the literature, and included:

- a) Availability of dedicated staff resources – Public health units that experienced benefits had dedicated staff resources to support accreditation on an ongoing basis; “It is not a ‘side of desk’ exercise.”
- b) Financial cost – Accreditation programs are costly; many respondents spoke to the cost being prohibitive given current funding challenges and the number of competing priorities.
- c) Value compared to alternative frameworks and approaches – Public health units that rated the value of accreditation highly spoke to how accreditation had informed the development of their organization’s quality program and provided a common continuous quality improvement (CQI) language. They also noted that external peer reviewers are able to share their knowledge from other organizations about improvement opportunities. Public health units that opted not to participate in an accreditation program spoke to their commitment to and success in engaging alternative frameworks and approaches to support CQI within their organizations.
- d) Organizational readiness – Some respondents indicated that the benefits of accreditation may vary, depending on the organization’s readiness to engage in an accreditation program from resource capacity and cultural standpoints.

### **Next Steps**

MLHU is committed to comprehensive use of the Planning and Evaluation Framework (PEF), Balanced Scorecard, and other quality improvement strategies and practices. MLHU is also undergoing significant change with intensive financial and human resources requirements: the Location Project, electronic client record (ECR) implementation, and implementation of an enterprise resource planning (ERP) solution.

Accreditation remains as an option for the Board of Health to advance quality improvement, and should be reconsidered periodically for its potential benefits and costs to the organization.

This report was prepared by the Healthy Organization Division.



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