



Health Sciences North/ Horizon Santé-Nord

Accredited with Exemplary Standing

Health Sciences North/ Horizon Santé-Nord has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement.

Health Sciences North/ Horizon Santé-Nord 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 **Health Sciences North/ Horizon Santé-Nord** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Health Sciences North/ Horizon Santé-Nord (2023)

Health Sciences North is the regional hospital for more than half a million people across Northeastern Ontario. HSN has 15 sites in Greater Sudbury and provides services at 18 sites across a region of 400,000 square kilometers. Northeastern Ontario looks to HSN and HSNRI for leadership and for support in planning, partnering and delivering health services. With 7,500 dedicated and resilient employees, medical staff, learners and volunteers, HSN is also the second largest hospital designated under Ontario's French Language Services Act.

Accreditation Canada

We are independent, not-for-profit, 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

June 4, 2023 to June 8, 2023

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

- **19 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.

Health Sciences North (HSN) and the Health Sciences North Research Institute (HSNRI) are Northeastern (NE) Ontario's regional referral centre and academic health sciences centre. HSN is the 19th largest hospital corporation in Ontario and 2nd largest designated under Ontario's French Language Services Act. HSN operates 15 locations across the greater Sudbury region and NE Ontario and operates approximately 600 beds when it was built for 412 and has 119 one-time surge beds open since the pandemic. The organization is over-capacity and making the best use of all space with capital redevelopment projects being advocated for at various stages at the government.

With a purpose to provide high quality health services, support learning and generate research that improves health outcomes for the people of NE Ontario, the population served by HSN include 30 percent of the rural communities, 23 percent of which are francophone and 11 percent Indigenous peoples. In addition, 50 percent of oncology patients and 60 percent of cardiac patients are from across NE Ontario. The 2019-2024 strategic plan for HSN and the HSNRI was developed by engaging patients, families, employees, medical staff, learners, volunteers, health, social service, primary care and academic partners, partnering hospitals and funders.

Some notable achievements include very engaged and active Patient and Family Advisors (PFAs) totalling of 41 at this time; achieving the highest quality improvement indicators in 22/23 for cancer programs in Ontario, implementation of a leading practices MH inpatient unit focus for patients with substance abuse as an Addictions Medicine Unit (AMU); opening the first COVID-19 assessment centre in Ontario at the beginning of the pandemic and the rapid response for the Sudbury and surrounding areas along with leadership throughout this time in NE Ontario; commitment to Indigenous health services and honouring cultural needs. An example of this is the opening of the beautiful Medicine Lodge for traditional healing and ceremonies. There is also a strong commitment towards social accountability and the continued desire to work towards breaking down stigma of peoples served and partnering with the community for solutions to support the homeless population through enhanced services such as addictions and mental health resources.

The HSN Board of Directors are a committed skill-based board with every effort made annually

through the recruitment process to ensure they represent culturally and geographically the communities they serve. They are proud of the work of the HSN teams and how every effort to support, partner and lead towards improvement in the health system are made. They promote collaboration and advocate strongly for the communities they serve.

Community, academic and hospital partnerships have evolved significantly through the pandemic and the HSN team is often sought after to collaborate, lead or partner on initiatives that are important to the NE communities and, more locally, the patients directly served. Examples included the Incident Management System (IMS) structure in which HSN led the NE in pandemic response for their community and surrounding communities along with supporting the recent pediatric RSV surge; opened in partnership with St Joseph's a 60 bed complex continuing-care unit to be able to decant from HSN should it be required in the early waves of the pandemic; partnering with the community on options for the homeless and individuals with mental health and addictions; collaborating with academic institutions for joint opportunities to attract and retain learners in the region; launching a successful community paramedicine program with EMS; providing leadership with the regional information systems structure and resulting move to a shared service organization (SSO); commitment to the francophone, 2SLGBTQ+ and Indigenous communities served; and launching virtual care and remote care monitoring (RCM) programs for psychiatry and mental health and addictions support names a few of the initiatives the community partners very gratefully described. HSN is considered receptive, present, having a positive attitude of collaboration, patient focused, accountable, with exceptional leadership.

Opportunities described were to continue to build the integrated care delivery of the future by leading beside the community partners to create the seamless, accessible, care delivery system that community members are hopeful for through continued partnerships, ease of access through centralized means and building on mutual respect. Partners recommended continuing to build with the equity lens especially for the regional programs and access from communities outside of Sudbury in the NE, and to build on cultural social sustainability with the new leadership. Improving communication and handoffs to the community in a seamless fashion, using their size and voice for advocacy for social determinants of health, specialized community services, and continuing to address improvements for the francophone and Indigenous communities were also recommended. There is a desire for HSN to continue to advance the academic mission through such things as joint credentialing for physicians.

Recruitment over the last year has kept a pace greater than turnover at 1.7 hires for every employee who has left which is an achievement in light of the national health human resource (HHR) shortages. While there are positive recruitment stories it was also noted and observed that there has been turnover and changes at the management and senior leadership level and active recruitment of team members is in progress along with new roles added such as Director of Indigenous Health and Manager of Workplace Wellness. A physician lead for wellness is also in progress of being recruited. There are many interim leadership positions in place and recruitment is being prioritized including that of both the CEO and COS. This is a time of change and transition for an organization that has made many efforts to stay ahead of the pressures in the system with active position control and ability to recruit from Laurentian University, and Boreal and Cambrian colleges. For example, there were 30 extern nursing students working on a medicine unit with 28 new hires joining that team in the

summer of 2023. Every effort to implement retention strategies should be entertained by evolving the approaches to such things as a supportive and effective onboarding, meaningful recognition, and wellness supports in the workplace.

Leadership at HSN brings together a committed and passionate group of professionals from a diversity of skillsets and experience that have transitioned into their roles through growth and development at HSN or via external recruitment. The focus of achieving five key organizational goals: be patient and family focused; be digitally enabled; be socially accountable; support and develop our people; and strengthen our academic research impact, was evident with lots of pride and passion in the work they do. Development of new leaders has been prioritized and offered through an emerging leader program twice per year. The resiliency of leaders and the support for their teams during difficult years was exceptional.

A culture of quality improvement and a robust quality management system was evidenced with a cascade of goals and objectives that align with the strategic priorities of NSM. Quality boards were evident, and staff were well informed and engaged in addressing success towards achieving target KPI's.

Since 2019 there are now an additional 119 beds in operation, a reactivation unit opened off site, a new addictions medicine unit, enhancements to remote care monitoring and availability of virtual care. Collaboration with funders to address the needs of the communities served by showing leadership in NE Ontario so patients can receive care closer to home was a tremendous strength of the HSN leadership. Leaders are collaborating on a capital plan to address a more supportive environment for individuals who require emergency, pediatric, or mental health care.

Commitment towards truth and reconciliation by honouring and respecting the health needs of Indigenous peoples through investments in support for leadership in a director role and for patient care, with navigators for the cancer care and perinatal programs, was evident. HSN is encouraged to continue to support equity and respect for all people and embrace health in a way that matters to them.

HSN has made considerable progress from their last survey to advance person-centred care as a cultural norm. Patient and family centred care is identified as a key strategic priority and resources have been brought forward to educate staff and leaders on the benefits of embedding this philosophy in their daily practice and approach to care. At the direct care level patients felt included in decision-making and setting goals of care. All patients and family members felt empowered to ask questions and to request information and tools to self-manage their health up to and beyond discharge. A very active and dedicated group of 41 Patient and Family Advisors support all levels of care delivery and planning. They participate as inclusive, collaborative members in co-design in areas and programs such as ethics, budget, capital planning, resource allocation, strategic planning, and even more significantly at program level councils. HSN is encouraged to consider including a Patient and Family Advisor as a member of their Board.

Overall, the experience of patients in the Sudbury and surrounding communities is top of mind for all staff. Providing quality, compassionate care and services while living the HSN values is the aim of all

employees and physicians.

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.

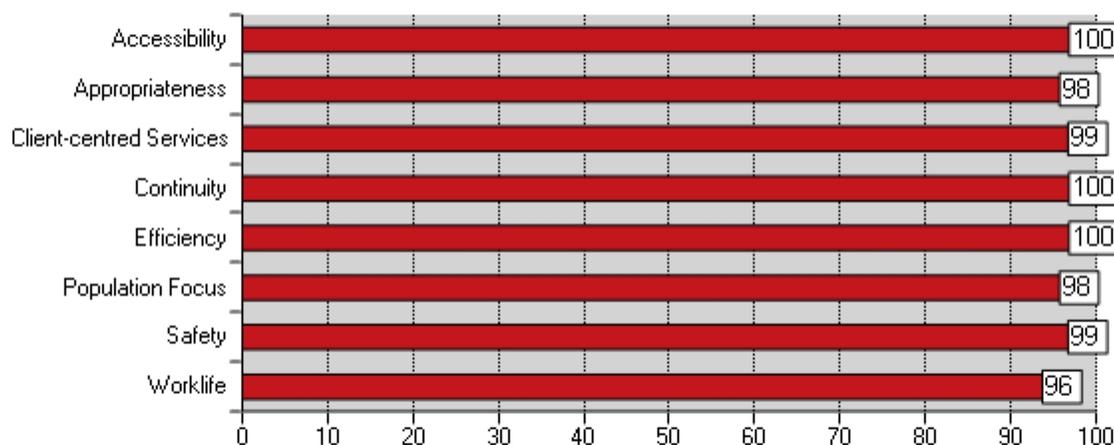
The quality dimensions are:

	Accessibility:	Give me timely and equitable services
	Appropriateness:	Do the right thing to achieve the best results
	Client-centred Services:	Partner with me and my family in our care
	Continuity:	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
	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

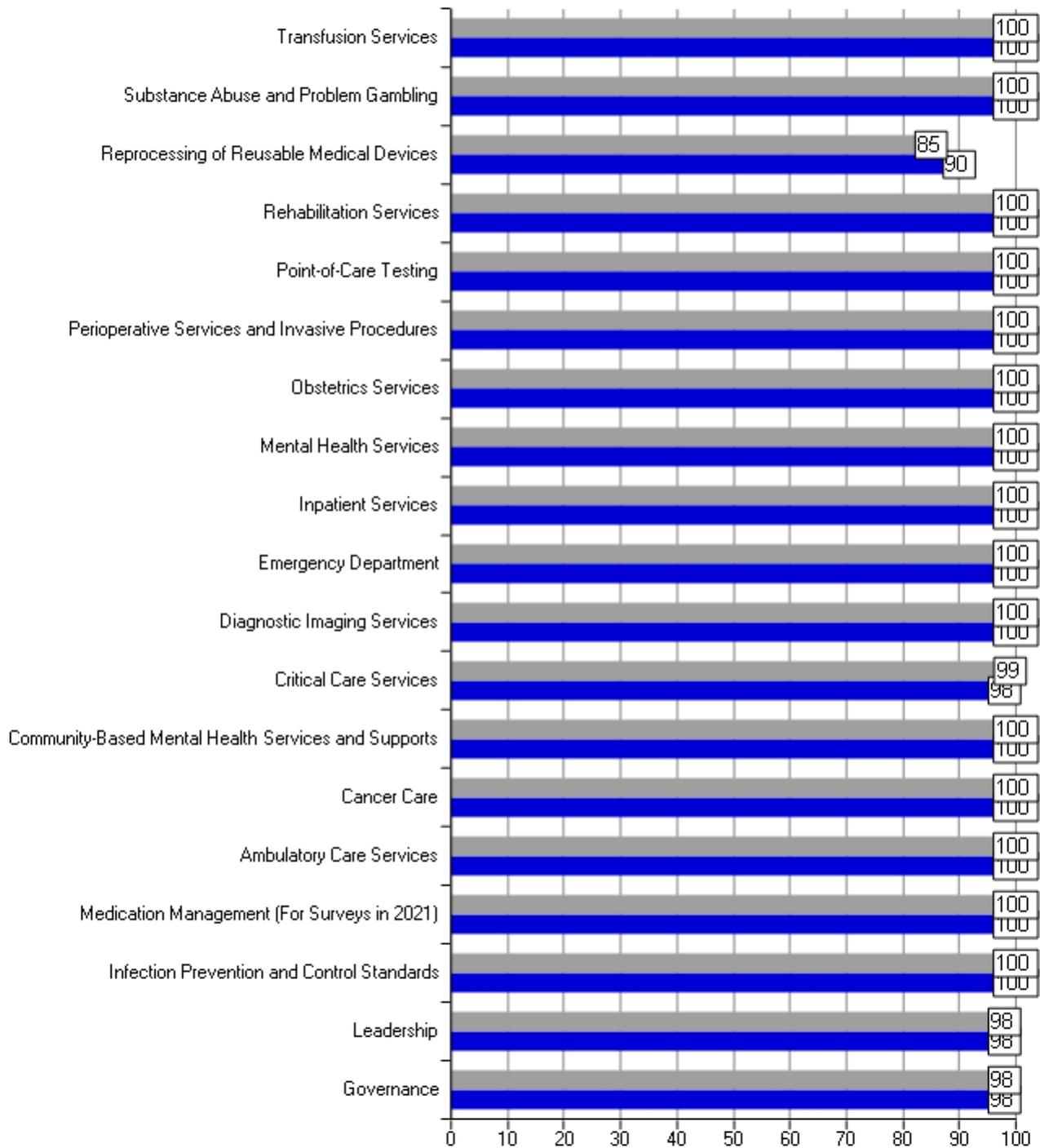
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

Standards: Percentage of criteria met

High priority criteria met Total 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.

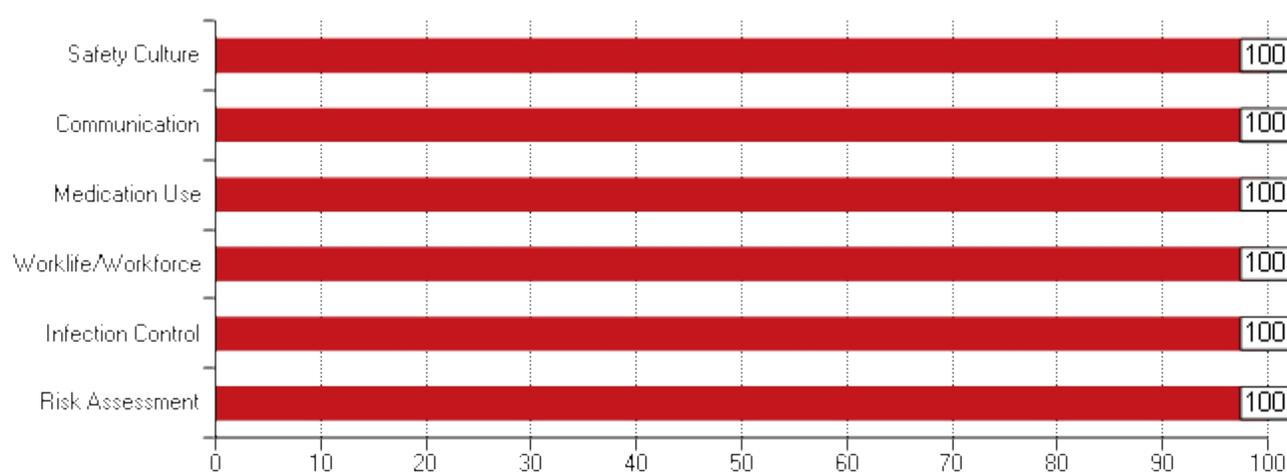
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



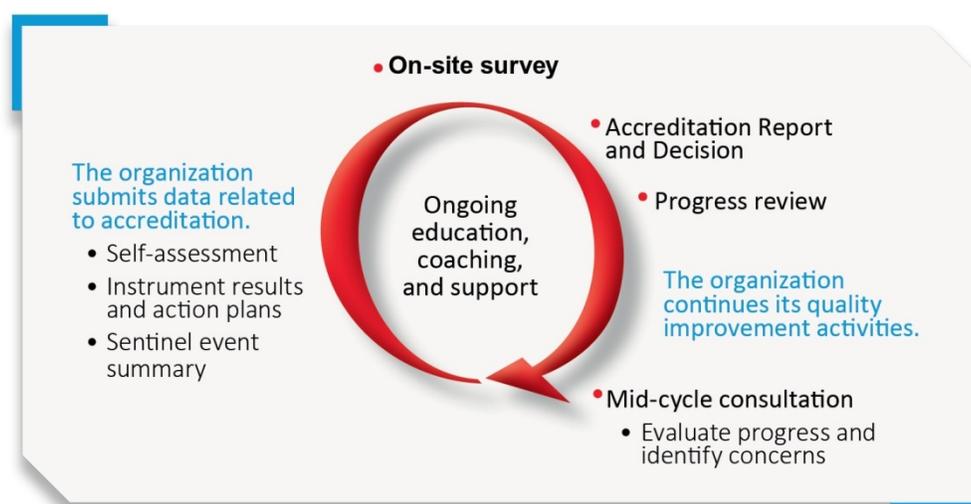
The quality improvement journey

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.

Qmentum: A four-year cycle of quality improvement



As **Health Sciences North/ Horizon Santé-Nord** 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 Health Sciences North/ Horizon Santé-Nord

Appendix B

Required Organizational Practices

Safety Culture

- Accountability for Quality
 - Patient safety incident disclosure
 - Patient safety incident management
 - Patient safety quarterly reports
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Communication

- Client Identification
 - Information transfer at care transitions
 - Medication reconciliation as a strategic priority
 - Medication reconciliation at care transitions
 - Safe Surgery Checklist
 - The “Do Not Use” list of abbreviations
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Medication Use

- Antimicrobial Stewardship
 - Concentrated Electrolytes
 - Heparin Safety
 - High-Alert Medications
 - Infusion Pumps Training
 - Narcotics Safety
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Worklife/Workforce

- Client Flow
 - Patient safety plan
 - Patient safety: education and training
 - Preventive Maintenance Program
 - Workplace Violence Prevention
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Infection Control

- Hand-Hygiene Compliance
 - Hand-Hygiene Education and Training
 - Infection Rates
-

Risk Assessment

- Falls Prevention Strategy

Required Organizational Practices

- Pressure Ulcer Prevention
 - Suicide Prevention
 - Venous Thromboembolism Prophylaxis
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