



## Prairie Mountain Health

### Accredited

**Prairie Mountain Health** has met the requirements of the Qmentum accreditation program and has shown a commitment to quality improvement.

**Prairie Mountain Health** 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 **Prairie Mountain Health** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

### **Prairie Mountain Health (2024)**

Prairie Mountain Health was established in 2012 following the amalgamation of 3 Regional Health Authorities.

PMH employs approximately 8400 staff and delivers acute care, long term and transitional care, rehabilitation and therapy services, mental health, home care, public health, primary health care, addiction services and partners with Shared Health for services such as emergency medical services.

PMH spans an area of 67,000 square kilometers and is growing in population and diversity.

The population of 172,000 residents is inclusive of 55 towns/municipal councils, 2 cities, 14 First Nation communities, 15 Northern Affairs communities, and 30 Hutterite communities.

### **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](http://www.isqua.org), a tangible demonstration that our programs meet international standards.

Find out more about what we do at [www.accreditation.ca](http://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

May 26, 2024 to May 31, 2024

### Locations surveyed

- **49** 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** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

### Standards used in the assessment

- **23 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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Prairie Mountain Health (PMH) was officially formed in June 2012, following the Manitoba government amalgamation of the former regional health authorities of Assiniboine, Brandon, and Parkland. It is one of five regional service delivery organizations (SDO) in the province. The region covers a large geography and is recognized as the traditional territories of the Cree, Dakota, Ojibway, Oji-Cree and homelands of the Metis with 14 First Nations Communities.

The Board of Directors (The Board) consists of 11 members appointed by and accountable to the Minister of Health, Seniors and Active Living. The board members are very committed to the region, and it is evident that they are focused on their mandate to ensure quality care for all and advancing person centered care. The members represent the various communities of interest and come with leadership and life experiences that enable them to lead the strategic priorities of PMH. The board has a well-established committee structure with four standing committees supporting finance and audit, human resources, quality and patient safety, and ethics. The Board ensures that the organization complies with applicable legislation, regulations, provincial policies, and Ministerial directives.

In 2023, the Board successfully completed the five-year strategic plan that establishes a vision to guide the organization forward into the future. The strategic roadmap identifies the health region's four priorities aimed at building a healthier population and creating a quality, integrated, and sustainable health system.

The survey process provided an opportunity to meet with community members and partners in the region. Overall, the feedback from the participants was positive and they welcomed the openness and transparent relationships that exist between the PMH staff and the community. Participants were complimentary in their observations and recognized that there are many opportunities to participate through surveys, forums, and committees to shape programs and services. The individuals recognized and participated in development of the new five-year strategic plan.

The PMH leadership team has undergone considerable change since the last accreditation and the team has navigated the many challenges associated with the pandemic. Since 2024, there has been a new Chief Medical Officer, Chief Nursing Officer, and Chief Executive Officer. These changes are seen as positive and lay the foundation for the future as the region continues to grow and address long-standing challenges. The team is committed to advancing efforts to improve quality care and services, in partnerships within the region and across the province. The region continues to struggle with staff and physician recruitment, aging infrastructure and facilities, along with population growth, while maintaining financial stability.

Since the last survey, PMH has successfully managed through the COVID-19 pandemic. The patient's focus group recognized the efforts of the staff in supporting patients and the community throughout this unprecedented period. There is a recognition that PMH leadership and staff were focused on providing quality care and services which kept individuals safe and completed necessary directives to protect the community. During this time, lives were lost, and individuals and teams are commended for their commitment to patient care.

There is recognition that there are many challenges currently with respect to recruitment and retention of staff. The organization continues to advance strategies to hire appropriate staff, often engaging in innovative approaches, and this will be ongoing in the following years through efforts to hire skilled staff and physicians. Exploring new models of care delivery and partnerships will need to continue to ensure access to care is available to the community. The organization will be working on completing staff work-life surveys in the future to ensure the focus on retention, reward, and staff recognition.

PMH works to obtain feedback from patients on their programs and services to advance quality care. Patient experience information is continually obtained in the form of surveys, direct feedback, and focus groups to ensure there is a constant connection with the individuals served. Patients were positive in their comments and feedback and recognized that PMH is committed to providing the best care possible for the community.

The evolving nature of the organization of health care in Manitoba presents some challenges to PMH. Some services formerly delivered by PMH are now delivered by Shared Health Manitoba. There seems to be a lack of awareness of the digital health roadmap for the province and how it will be implemented within PMH. There is a need to advance the implementation of clinical information systems to enhance care and service, and yet little seems to be known of the plan to achieve that vision.

Through multiple site visits across the organization, a fragmented and multiple electronic medical record (EMR) system was discovered. This fragmentation has created significant barriers in clinical service delivery, leading to inefficiencies and inconsistencies in patient care. Transitioning to a single platform EMR would provide a cohesive framework to support PMH in strengthening clinical and process standards. An integrated approach will ensure increased consistency of care, reducing the risk of errors and omissions. Patients will also experience faster access to their test results and medication therapies, allowing for more timely interventions and treatments.

Educational partners, municipal officials, and community partners are very complementary of their relationship with PMH. They recognize the challenges facing the organization while, at the same time, confirming the commitment that PMH has made to engage with them and deliver on shared solutions.









PMH has made significant strides over the past four years despite much of that time being spent responding to the pandemic. The organization can take pride in what it has achieved and the advancement that it has made in quality, person-centred care and the level of engagement with its communities.

## 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.

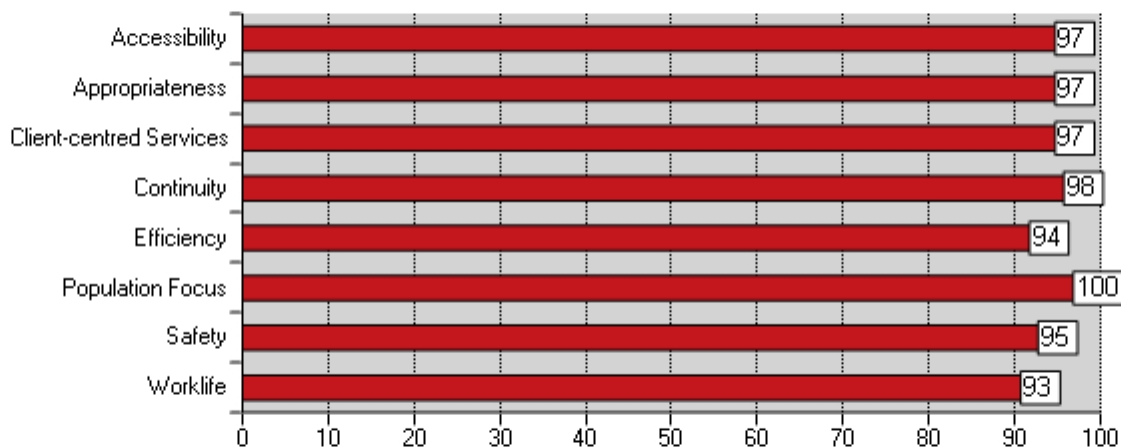
The quality dimensions are:

-  **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

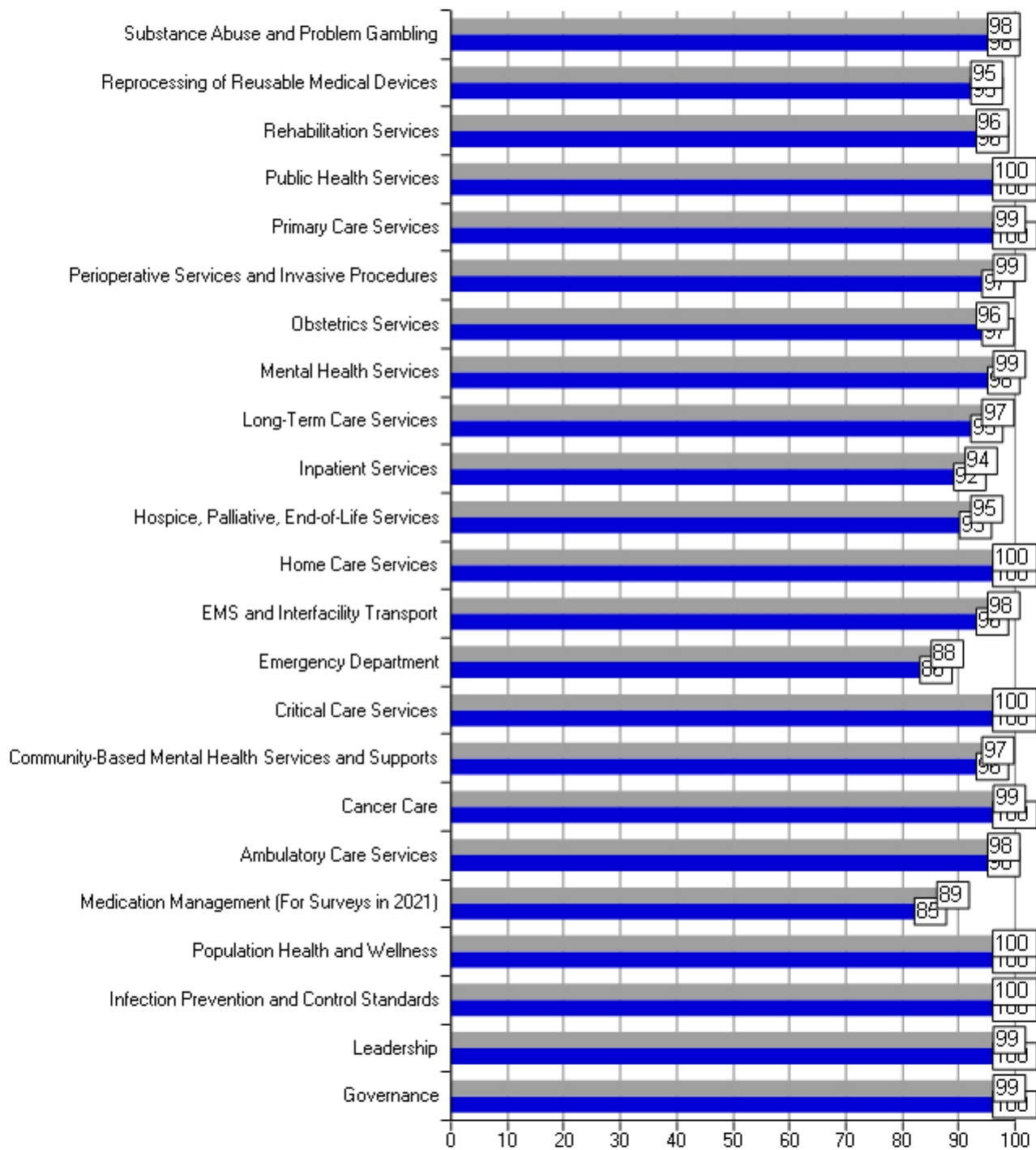
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

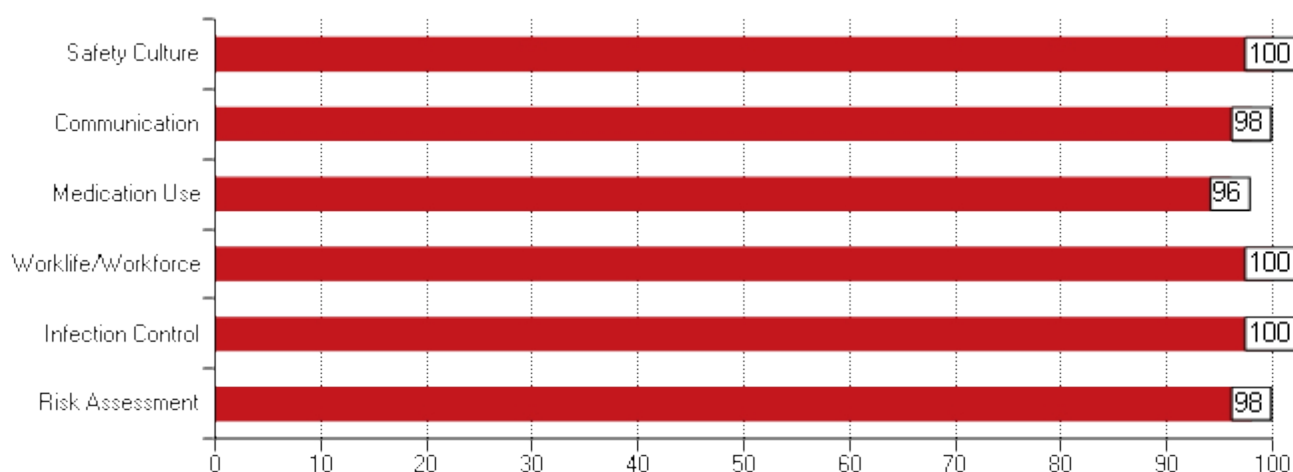
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



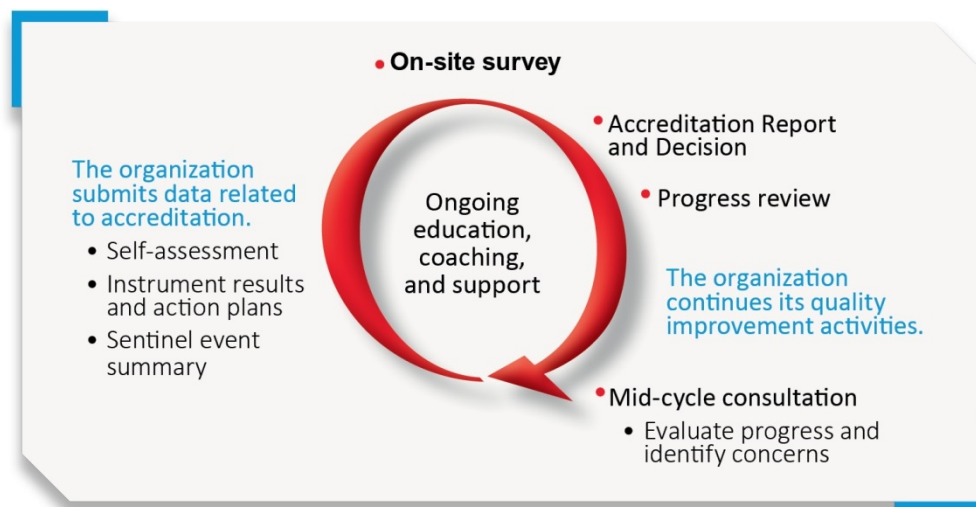
## The quality improvement journey

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 **Prairie Mountain Health** 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 Baldur Health Centre
- 2 Birdtail Sioux First Nation
- 3 Birtle Health Centre
- 4 Boissevain - Westview Lodge PCH
- 5 Brandon - 7th Street Health Access Centre
- 6 Brandon - Child and Adolescent Treatment Centre
- 7 Brandon - Parkwood (formerly AFM)
- 8 Brandon - Rideau Park Personal Care Home
- 9 Brandon - Western Manitoba Cancer Centre
- 10 Brandon - Westman Crisis Services
- 11 Brandon Regional Health Centre
- 12 Brandon Town Centre Main Level (Population Health & Wellness)
- 13 Brandon Town Centre Upper Level (Home Care)
- 14 Centre for Geriatric Psychiatry (CGP) - Brandon
- 15 Dauphin (Formerly) AFM (Addictions Services & Primary Care Outreach Centre)
- 16 Dauphin - St. Paul's Personal Care Home
- 17 Dauphin Regional Health Centre
- 18 Deloraine - Bren-Del-Win Lodge Personal Care Home
- 19 Deloraine Health Centre
- 20 EMS Boissevain
- 21 EMS Brandon
- 22 EMS Glenboro
- 23 EMS Mafeking
- 24 EMS Shoal Lake
- 25 EMS Swan River
- 26 EMS Virden
- 27 Grandview Personal Care Home
- 28 Hamiota Health Centre
- 29 Hartney Personal Care Home
- 30 Killarney - Tri-Lake Health Centre
- 31 McCreary/Alonsa Health Centre
- 32 Minnedosa Health Centre
- 33 Neepawa Health Center
- 34 Neepawa Health Unit (Mental Health & Public Health)
- 35 Neepawa Personal Care Home
- 36 Rivers Health Centre

- 37 Roblin District Health Centre
- 38 Rosburn Health Centre
- 39 Russell Health Centre
- 40 Sandy Lake Personal Care Home
- 41 Shoal Lake / Strathclair Health Centre
- 42 Souris Health Center
- 43 Ste. Rose District Hospital
- 44 Swan River - Community Health Service Office
- 45 Swan River - Swan Valley Health Centre
- 46 Swan River Valley PCH
- 47 Treherne - Tiger Hills Health Centre
- 48 Virden Health Centre
- 49 Wawanesa Health Centre

## Appendix B Required Organizational Practices

### Safety Culture

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

### 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

### Medication Use

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

### Worklife/Workforce

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

### Infection Control

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

### Risk Assessment

- Falls Prevention Strategy
- Home Safety Risk Assessment
- Pressure Ulcer Prevention
- Skin and Wound Care
- Suicide Prevention
- Venous Thromboembolism Prophylaxis