



Glacier View Lodge

Accredited with Exemplary Standing

June 2018 to 2022

Glacier View Lodge has gone beyond the requirements of the Qmentum accreditation program and demonstrates excellence in quality improvement. It is accredited until June 2022 provided program requirements continue to be met.

Glacier View Lodge 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 **Glacier View Lodge** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Glacier View Lodge (2018)

Glacier View Lodge is a complex care facility that has adopted the Eden Alternative Philosophy of Care. Glacier View Lodge provides residential care to 101 seniors in the Comox Valley. We also offer community outreach services to support seniors and their caregivers through Respite, Adult Day Program and a Community Bathing Program.

Glacier View Lodge has been operating in its current location since 1982.

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 11, 2018 to June 13, 2018

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

- **5 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.

The Glacier View Society Board of Directors and staff of Glacier View Lodge are committed to excellence in resident- and family-centred care and service delivery with innovation and meaningful community engagement. The mission and values are aligned with the organization's strategic priorities. The organization communicates the vision, mission, and values in a number of effective ways, including posting them in its annual report and on its website, and through other printed venues such as newsletters. Staff are generally familiar with the vision, mission, and values and are able to identify with them.

The organization has encountered challenges in the past year that have resulted in several changes to the board composition. Five of the seven current members are new to the board. The board now needs a period of stability to re-establish itself as it prepares for future opportunities for the organization. The board is strong and its members are committed to ensuring continued excellence for the lodge and the people it serves. Recruitment for more board members, to a maximum of eleven, will continue based on the need for specific skills.

The board is reviewing the future direction of the lodge. Following dissolution of plans for a potential amalgamation with another not-for-profit long-term care, the board has submitted a request for proposal to Vancouver Island Health Authority for the acquisition of new long-term care beds. If this is successful, there will be exciting but challenging times ahead. A strong change management plan will be required to ensure good preparation and widespread communication. As the executive director has accepted a new position, recruitment of a new executive director will be an extremely important task for the board. The organization is wished success as it continues its journey.

In keeping with the organization's commitment to continuous quality improvement, the board takes its accountability for quality improvement, risk management, and resident safety seriously. A Quality of Life/Ethics/Safety subcommittee of the board supports this.

The organization has a well-developed strategic plan that takes into account environmental scanning and the needs of the broader community. The development process for the plan included a broad

range of community input from internal and external stakeholders. Residents and family members provided input to the strategic plan, as did colleagues from partnering agencies and peer organizations. The strategic priorities are well articulated and presented in a meaningful, user-friendly format. These plans are regularly reviewed for progress in accordance with the targeted time frames. A new planning cycle will begin this fall.

The organization does a great job of assessing information about community health care needs and designing care programs to respond. This is evident in the great work being done in responding to the needs of residents with dementia, such as through the specialty unit dedicated those with this illness. Also, the recent expansion of the Adult Day Program and the continued commitment to the community bathing program illustrates Glacier View Lodge's commitment to the larger community.

The organization collaborates well with community partners such as the Vancouver Island Health Authority, St. Joseph's Hospital, and other peer facilities. The organization has worked hard to integrate and coordinate services and has been very progressive in expanding prevention and promotion activities. Community engagement is excellent, and there are alliances with a variety of community colleges, community organizations, and other health care providers. There is a very close working relationship with St. Joseph's Hospital and there are good examples of shared decision-making and coordination of contracted services between these two organizations.

The quarterly quality, risk management, and safety report is excellent, as is the balanced scorecard, both of which are used to guide opportunities for improvement. There is a demonstrated commitment to achieving a culture of safety.

Glacier View Lodge values its staff and is commended for the focus on professional growth and development.

Fundraising efforts by the lodge have been very successful in enhancing quality of care for its residents. This is commendable.

The organization has an ethics policy, Ethics Committee, and a decision-making model for both clinical and administrative ethical dilemmas.

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.

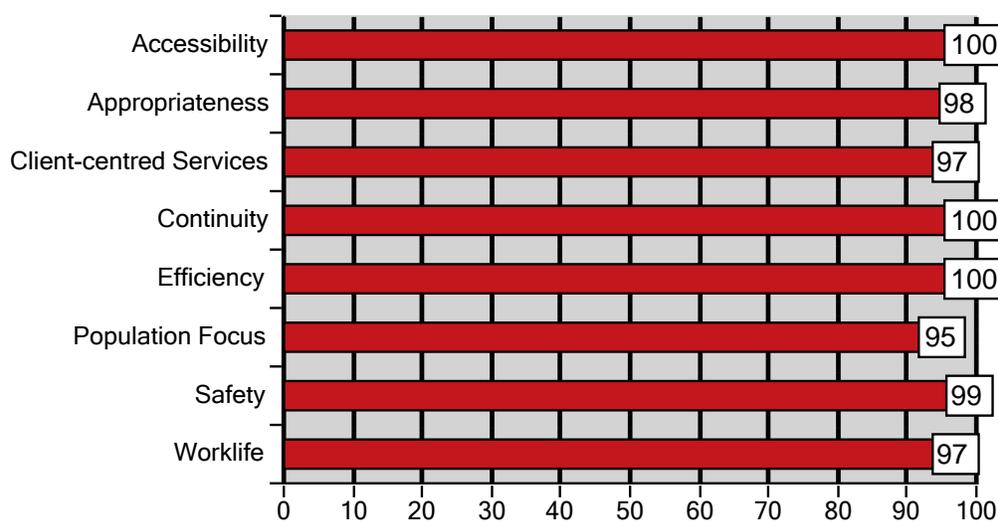
The quality dimensions are:

-  **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

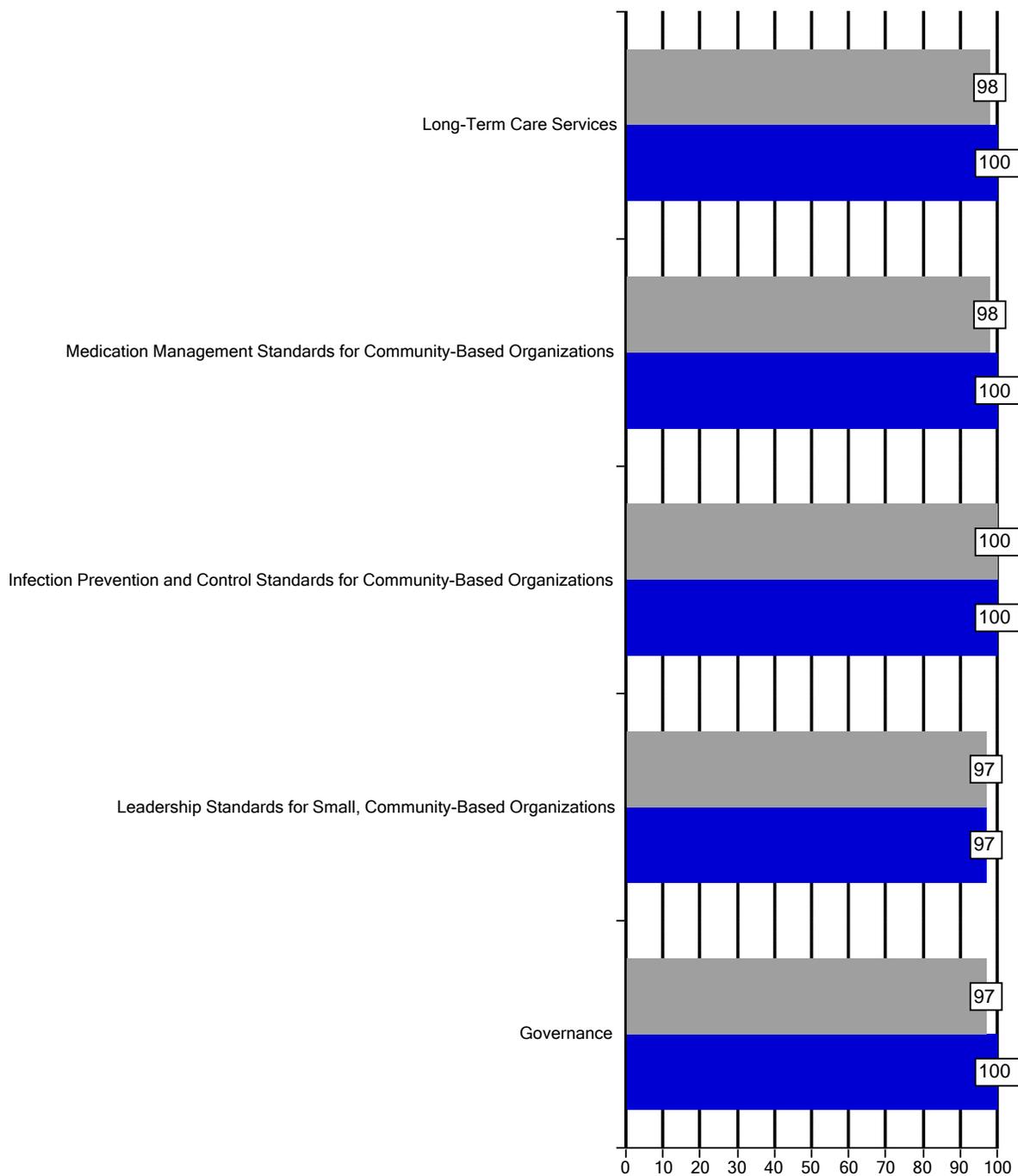
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

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.

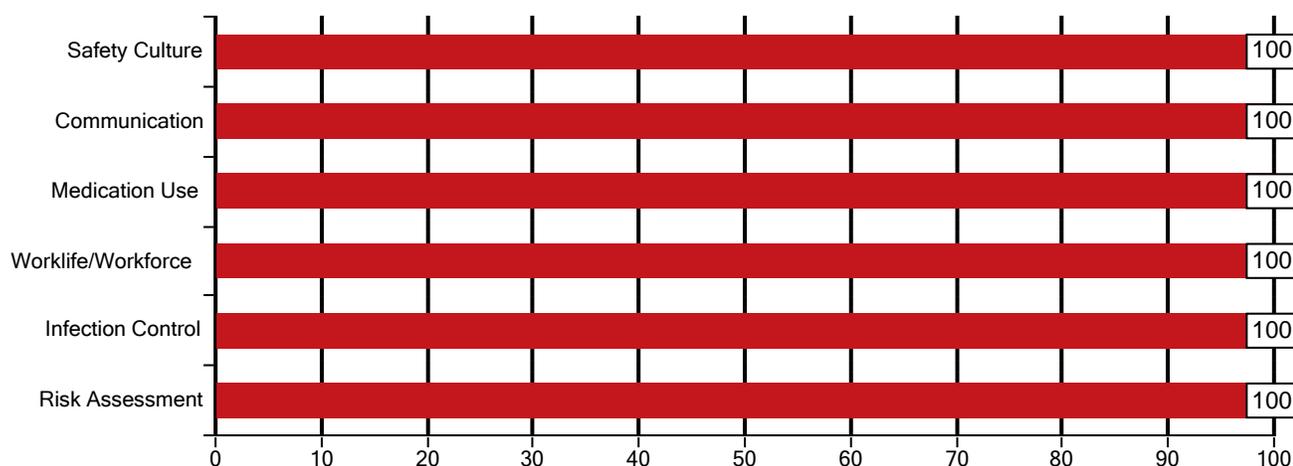
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes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



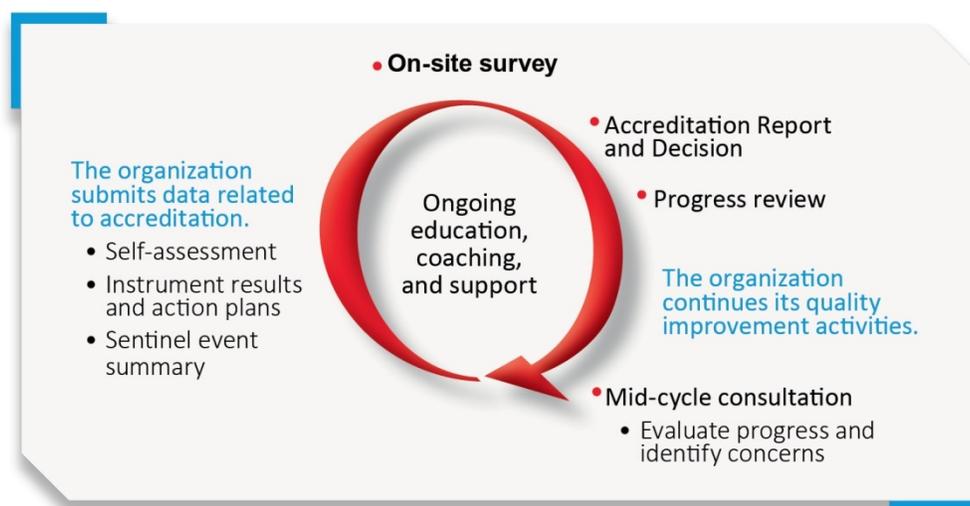
The quality improvement journey

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 **Glacier View Lodge** 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 Glacier View Lodge

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
 - Medication reconciliation as a strategic priority
 - Medication reconciliation at care transitions
 - The “Do Not Use” list of abbreviations
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Medication Use

- Heparin Safety
 - High-Alert Medications
 - Narcotics Safety
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Worklife/Workforce

- 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
 - Reprocessing
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Risk Assessment

- Falls Prevention Strategy
 - Pressure Ulcer Prevention
 - Suicide Prevention
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