

REGIONAL MUNICIPALITY OF OTTAWA-CARLETON  
MUNICIPALITÉ RÉGIONALE D'OTTAWA-CARLETON

REPORT  
RAPPORT

Our File/N/Réf.  
Your File/V/Réf.

DATE 18 September 1996

TO/DEST. Co-ordinator, Community Services Committee

FROM/EXP. Acting Medical Officer of Health

SUBJECT/OBJET **ACCREDITATION PILOT SURVEY**

**DEPARTMENTAL RECOMMENDATION**

**That the Community Services Committee name a representative to participate in the pilot testing of the draft national Home Care standards and related accreditation process.**

**DISCUSSION**

The Regional Municipality of Ottawa Carleton Home Care program has agreed to pilot test the draft national Home Care standards and related accreditation process, as developed by the Canadian Council on Health Services Accreditation (CCHSA). We have been chosen as one of ten pilot sites across Canada, and the only Home Care Program in Ontario to test the standards and the related accreditation process.

The objectives of this involvement for the Home Care program are as follows:

1. To participate in the development of a national accreditation program for organizations providing home care service to clients in the community;
2. To evaluate ourselves against the draft national home care standards and identify strengths and areas requiring improvement;
3. To prepare for future accreditation programs that we may be involved in.

The CCHSA runs a national accreditation system which assesses the quality of health services delivered by all types of health care organizations across Canada. Accreditation through the CCHSA is voluntary. There are two main components to the accreditation process. The first step is the self assessment phase where an organization reviews the standards and measures itself against the national standards. The second component is peer review. During this step the organization undergoes a peer assessment, where surveyors (peers) come and visit the organization, its staff and clients to assess the organization against those same standards.

In preparation for this pilot survey, the Home Care Program has established five teams to address the three different sections of the draft standards document. There will be three Client Service teams which will examine how well we deliver services directly to clients in the community. We have chosen teams to review the activity of three of our newly created client groups (these teams, consisting of staff from home care and some of our service providers, will review our work with the cognitively impaired client group, the functional support to seniors client group and clients in the acute care group).

There is also one team which will review the standards in the Support Service section of the document. This section focuses on the management of information, human resources and the environment in the organization.

The final team which has been struck will address the standards in the section entitled Leadership and Partnerships. The standards in this section apply to those who provide leadership within the organization. These are the individuals who set expectations, develop plans and implement processes to improve governance, management, support services and service delivery. This team typically includes members of the governing body, managers and staff members in a leadership position within the organization.

We are therefore requesting a representative from the Community Services Committee to join the Leadership and Partnership team. This representation would require the following commitment:

- Review the standards in the Leadership and Partnership section of the draft standards document (documentation on file with Coordinator), comment on the activity of the Community Services Committee with respect to certain standards in the section, and meet with other representatives of the Leadership and Partnership team to review and comment on the completed documentation for the section (October 1996, estimate 3-4 hours, to include one meeting);
- Participate in the interview of the Leadership and Partnership team when the pilot survey is conducted (November 1996, estimate 2 hour meeting).

### CONSULTATION

Public consultation for this process is not required.

### FINANCIAL IMPLICATIONS

The Home Care program is funded 100% by the Ministry of Health. There are no direct financial implications from this report.

*Approved by  
Geoff Dunkley  
Acting Medical Officer of Health*