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**CCA ACCREDITATION REVIEW
FINAL REPORT FOR
WOOLWICH COMMUNITY HEALTH CENTRE**

Date of the Site Visit: March 24-27, 2014

Date of the Report: June 25, 2014

ACCREDITATION TERM EXPIRES: JUNE 30, 2018

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INTRODUCTION

INTRODUCTION TO ACCREDITATION WITH CCA

The Canadian Centre for Accreditation (CCA) is a national not-for-profit offering accreditation to community-based health and social service organizations in Canada.

Accreditation provides an external review of an organization's operations in relation to accepted standards of good practice and risk management. Standards address all aspects of the organization, including governance, management, programs and services. It is also a system to promote learning, improvement, excellence and innovation.

CCA looks at the whole organization. Reviews are conducted by CCA-trained teams made up of senior staff, governing body members and volunteers from the community-based organizations that participate in CCA.

ABOUT THIS REPORT

This report summarizes the findings of the CCA review process to date. Comments are illustrative and not comprehensive. The report includes the following:

Section 1: An overview of the accreditation process and results at this stage

Section 2: A summary of accreditation review results

Section 3: Detailed Results by module, including a description of the strengths and areas for improvement identified by the review team.

Section 4: Concluding words

SECTION 1: OVERVIEW OF THE REVIEW PROCESS

The review team was made up of:

- Vicki Bales, President, Vicki Bales Consulting Inc., Toronto (team leader)
- Debbie Inman, Manager of Human Resources, NorWest Community Health Centres (reviewer)
- France Vaillancourt, Assistant Executive Director, Centre de Santé Communautaire Hamilton/Niagara (reviewer).

The review team:

- Reviewed results of CCA's surveys of the organization's governing body, staff, volunteers, community partners and educational partners (see summaries enclosed in the Preliminary Report).
- Reviewed the organization's documents and narratives submitted ahead of the site visit.
- Conducted a site visit which included:
 - An orientation to the organization, including a presentation from the Executive Director and Managers as well as brief tours of the St. Jacobs and Wellesley sites
 - Five group interviews including interviews with members of the governing body, a cross-section of staff, two interviews with program-specific staff, and one interview with managers
 - An individual interview with the Executive Director
 - Observations of the St. Jacobs and Wellesley locations
 - The tracing of a client journey through interviews and file reviews
 - Examination of some documents on site
 - Presentation of a verbal wrap up to the board and staff on the final day of the site visit.

A preliminary report was sent to the organization on April 1, 2014. The organization's response was received on May 9, 2014 and reviewed by a CCA Accreditation Manager.

The Accreditation Decision

At its June 20, 2014 board meeting, the CCA Board made the decision to fully accredit Woolwich Community Health Centre.

The organization's accreditation term date is June 30. That means the organization is accredited until June 29, 2018.

SECTION 2: SUMMARY OF ACCREDITATION REVIEW RESULTS

INTRODUCTION

Woolwich Community Health Centre (WCHC), founded in 1985, serves a rural Ontario community that includes the Territory of Woolwich Township, Wellesley Township and portions of Perth County and Wilmot Township. The centre operates out of three sites: a main site in St. Jacobs, a satellite site in Wellesley and a point of access in Linwood. WCHC's priority populations are:

- Seniors (60+) and their caregivers
- Families with young children (0-6)
- Farm Families, including those from conservative Mennonite groups including Low German-speaking Mennonites from Mexico
- Youth (14-19 years of age) (focussing on the Wellesley and Linwood sites).

The organization is supported by 37 full-time equivalent positions. Approximately 80% of staff work part-time, which means that WCHC employs over 55 individuals.

Overall, the review team found WCHC to be a healthy, effective organization that is delivering needed programs and services to its clients and community.

WCHC has met all the Mandatory Practice Standards and all the Leading Practice Standards, which is a significant achievement.

Results are summarized by module.

The following CCA modules apply to this review:

- Organizational Standards Module
- Community-Based Primary Health Care Standards Module.

In order to achieve accreditation, organizations must satisfy the requirements of all modules that apply. A module is achieved when all its components are met AND at least 80% of its Leading Practice Standards are met.

SECTION 3: ACCREDITATION REVIEW RESULTS BY MODULE

SUMMARY RESULTS: THE ORGANIZATIONAL STANDARDS MODULE

The organization has met 33 out of 33 Mandatory Standards and 25 out of 25 Leading Practice Standards in the Organizational Standards module, more than the number required for accreditation. (See Detailed Results by Module below.)

By Component	MANDATORY STANDARDS				LEADING PRACTICE STANDARDS					
	M-Total	M-Must be met	M-Achieved	M-Still to be met for accredd.	LP-Total	LP-Must be met to achieve Component	LP-Must be met to achieve Module	LP-Achieved	LP-Still to be met to achieve Component	LP-Still to be met to achieve Module
Governance	3	3	3	0	4	2	—	4	0	—
Stewardship	6	6	6	0	0	0	—	0	0	—
Oversight and Stewardship	0	0	0	0	0	0	—	0	0	—
Risk and Safety	4	4	4	0	1	1	—	1	0	—
Organizational Planning and Performance	3	3	3	0	3	2	—	3	0	—
Programs and Services	5	5	5	0	0	0	—	0	0	—
Community	0	0	0	0	5	3	—	5	0	—
Learning Environment	3	3	3	0	2	1	—	2	0	—
Human Resources	5	5	5	0	6	3	—	6	0	—
Volunteers	0	0	0	0	3	2	—	3	0	—
Systems and Structure	4	4	4	0	1	1	—	1	0	—
Totals for Module	33	33	33	0	25	—	20	25	0	0

Strengths in this Module

Strengths that the review team identified in the course of its reading and site visit are described below by component:

Governance. Governance as a whole was a major strength. The WCHC board demonstrated a clear understanding of issues such as conflict of interest, confidentiality and other matters relating to conduct supported by protocols for dealing with issues that arise. It is an effective board that is clear about its role and diligent in ensuring board continuity and renewal, maintaining the board at full or near-full strength with all executive positions filled. Regular meetings and the appropriate use of a consent agenda ensure the board focuses on issues that merit the most attention. Board evaluation plays a role in making sure issues identified are addressed through the regular meeting process and that the annual self-evaluation feeds into annual and regular board development. It was obvious to the review team that relations among directors and board-ED relationships are characterized by mutual respect. Any issues are addressed thoughtfully and transparently.

Stewardship. Regular monitoring and compliance reports are provided by the ED and staff to assist the board in its oversight role. There is an acknowledged cycle for policy and by-law review. The board offers strong financial oversight supported by a knowledgeable finance committee.

Risk and Safety. WCHC pays considerable attention to occupational health and safety through regular, frequent committee meetings and workplace inspections, a requested independent inspection of the St. Jacobs site by the Fire Chief, the work of the Quality Committee in tracking indicators that relate to health and safety, and the ED's regular quality reports to the board that address accidents and incidents. The review team was able to see that both the St. Jacobs and Wellesley sites were well maintained and safe workplaces for staff and safe program environments for clients. Interviews conducted as part of the client journey confirmed that the client complaint process is well known to clients and, more importantly, that clients feel comfortable in raising concerns with program and service staff when and as needed.

Organizational Planning and Performance. WCHC is coming to the end of a strategic planning cycle and is in the process of undertaking a new community needs assessment as part of an impressive three-agency partnership using the Canadian Index of Wellbeing. This process will see the organization engage with the community (including vulnerable populations in the area) through 30 focus groups. It will result in confirming or adjusting the centre's vision, mission, and values and the development of new strategic priorities. This the way that WCHC remains relevant to its community – a feature that is consistent with WCHC's culture of ongoing learning, improvement and innovation. The organization is currently guided by strategic directions developed in a previous strategic planning cycle that feed the centre's integrated service plan (ISP).

Programs and Services. The review team interviewed three clients as part of the client journey. They confirmed the results of WCHC's own client survey, speaking about feeling respected, well taken care of and listened to. For the review team, they confirmed WCHC's client-centered approach and positive relationships with clients. WCHC's focus on client outcomes is evident in its quality improvement processes described later and in the fact that a number of staff have completed the Vallis training, which focuses on changing behaviour by encouraging clients to take charge.

Community. Community relations and community engagement are areas where WCHC excelled. WCHC has a long history in this community, celebrating its 25th anniversary this year. It is clear from the review team's site visit and reading (especially the survey of community partners) that WCHC is a leader in the community. The organization has a high level of credibility as a partner and collaborator in developing and delivering programs and services. The centre clearly reaches out to the community including vulnerable populations soliciting input through surveys and focus groups and promoting programs and services through its own newsletters as well as articles and notices placed in local community papers as well as posters placed in the offices of allied health professionals in private or group practice. The centre's relationship with the Old Order Mennonite Advisory Committee is a cornerstone in the organization's foundation dating back to its beginnings and continuing today through regular meetings with WCHC's ED. WCHC's communication plan and protocols are known and understood by board and staff.

Learning Environment. WCHC offers a wide variety of students quality learning opportunities. Educational partners surveyed by CCA confirmed the value of these opportunities. In addition, the centre participates from time to time in research projects (most recently, the hypertension study being run under the auspices of the Heart and Stroke Foundation). Both of these activities – students and research – benefit the centre by supporting the development and adoption of best practices. Offering student placements also afford WCHC the opportunity to attract and recruit graduates to centre positions.

Human Resources. CCA's survey of staff as well as interviews conducted by the review team confirmed that communication works extremely well at WCHC. The team heard how staff are encouraged to propose changes that can improve their work environment, such as recent changes to the St. Jacobs reception area. Management's commitment to an equitable amount of training days for all staff during tight fiscal times is a credit to the organization's investment in ongoing professional development. The centre has been diligent in ensuring staff training internally for WHMIS, AODA, privacy, emergency preparation, crisis prevention and compassionate fatigue. Staff morale is a strength based in mutual respect and a commitment to the values and principles espoused by the organization. Specialized work and service spaces (e.g., the Healthy Smiles exam room and the chiropody/orthotic rooms at both St. Jacobs and Wellesley) ensure that there is still room to support staff in providing targeted services that can be challenging in tight spaces.

Human Resources – Volunteers. WCHC has over 100 volunteers who support almost all programs and services. Their roles range from conducting home visits as part of the hospice program to assisting in organizing community events. The volunteer recruitment process is thorough and the organization is doing excellent work in making sure it recruits and deploys volunteers who can communicate with the Low German-speaking population. Policies and procedures are in place to ensure adequate volunteer training and safety.

Systems and Structure. WCHC has a process that guides the collection, use and release of personal information and makes every effort to ensure that clients understand their right to privacy and the requirements that guide the organization's collection, protection and release of information. An example of WCHC's concern for privacy at work is the effort it has made in reaching out to Low German-speaking Mennonites who have emigrated from Mexico. These individuals display low literacy levels and operate in a language that is not written. WCHC has used peer support workers as translators to support client intake from this group and these workers also play a role in program delivery for this population.

Areas to Further Improve Quality in this Module

There are no areas identified for further improvement. The organization is commended for its achievement of all the Leading Practice Standards and indicators in this module.

Additional Comments

The review team encourages WCHC to clarify when new client orientation is complete and how this should be documented (Indicators ORG-PS-5.3). It may be necessary to await the complete transition to the “Nightingale on Demand” electronic health record for this to occur.

No immediate action is required with respect to this particular issue.

SUMMARY RESULTS: THE COMMUNITY-BASED PRIMARY HEALTH CARE STANDARDS MODULE

The organization has met 13 out of 13 Mandatory Standards and 6 out of 6 Leading Practice Standards in the Community-Based Primary Health Care Standards Module, more than the number required for accreditation.

(See Detailed Results below.)

By Component	MANDATORY STANDARDS				LEADING PRACTICE STANDARDS					
	M-Total	M-Must be met	M-Achieved	M-Still to be met for accred.	LP-Total	LP-Must be met to achieve Component	LP-Must be met to achieve Module	LP-Achieved	LP-Still to be met to achieve Component	LP-Still to be met to achieve Module
Community-Based Approach	1	1	1	0	3	2	—	3	0	—
Delivery of Quality Programs and Services	7	7	7	0	3	2	—	3	0	—
Risk and Safety	5	5	5	0	0	0	—	0	0	—
Totals for Module	13	13	13	0	6	—	5	6	—	0

Strengths in this Module

Strengths that the review team identified in the course of its reading and site visit are described below by component:

Community Based Approach. The focus of the CCA standards on health equity is a new feature in WCHC's accreditations. WCHC is able to demonstrate that it takes this focus seriously particularly when management and staff point to the history of community needs assessment at WCHC and how this informs the organization in identifying and confirming its priority populations and in setting strategic priorities. WCHC is sensitive to recruiting staff and volunteers who have knowledge of the population served. The centre adapts services to its clients based on client input and demonstrates flexibility – for example, adjusting program delivery times and developing transportation and other strategies that promote accessibility. Seeking regular client input in order to gauge client satisfaction levels, benchmarking results and working to improve is fundamental to WCHC's community-based approach to program and service delivery and its commitment to quality, which is further detailed below.

Quality Programs and Services. WCHC uses a variety of standardized tools to assess individual client needs and strengths, while adapting tools and templates as needed to focus on issues that can inform practice and improve outcomes. Client surveys provide WCHC with more macro level input along with some special projects. For example, the centre has been monitoring wait times for service on a regular basis with a view to improvement and undertaken a major review of its waitlist that has resulted in halving the number of clients listed. There are many examples of collaborative practice that further support the centre's holistic approach to program delivery including case conferences with internal and external providers and occasionally including family members, various issue-based team meetings, cross-team sessions and other formal and informal examples of inter-professional practice that support continuity of care and coordination of service. Clients who may resist or at least question various interventions are encouraged to take responsibility for their own health. The fruits of some of these WCHC staff efforts are evident in the outcomes associated with WCHC's Diabetes Education Program and breast-feeding practices promoted by the Gesundheit Fur Kinder program. All of these activities, as well as an impressive pattern of client record audits are examples of the considerable attention that WCHC pays to quality.

Risk and Safety. WCHC's efforts to address children and farm safety is an example of how the organization has been proactive in addressing client safety.

Areas to Further Improve Quality in this Module

There are no areas identified for further improvement. The organization is commended for its achievement of all the Leading Practice Standards and indicators in this module.

SECTION 4: CONCLUSION

The CCA review team appreciates the work that WCHC undertook to prepare for its review and the warm welcome and support that the team received while on site.

The team was impressed with WCHC as an organization that is focused on quality through the use of quality management processes that address all levels of the organization from board to front-line staff and that include self-evaluations, surveys, client record reviews, peer reviews and other reflective practice. The team was also impressed with the positive organizational culture evident at WCHC.

The team recognized that this review came at a crossroads for WCHC. The past year has seen many challenges, but WCHC has been able to move beyond the many stresses and engage in this new accreditation process as a learning opportunity.