

WELCOME ACCREDITATION CANADA SURVEYORS!



THE ADVOCATE!

"Keeping you in touch with our collective critical care team"

ACCREDITATION 2017: Accreditation is an external assessment of our organization against pre-established, evidence-based standards. Standards are developed by sector-specific experts. Standards include:

- 'System' Standards, for example, Governance, Leadership, Infection Prevention and Control, and Medication Management
- Service-specific Standards, for example, Critical Care

From October 15th to 20th, NSHA will be visited by a team of 30 Accreditation Canada surveyors. These Surveyors are experienced clinicians and administrators from across the country. They will be visiting sites across the province and speak with leadership, clinical, administrative and support staff, physicians, patients and families.

The Surveyors use a 'tracer' methodology, whereby they examine and follow a patient's care through our system. As such, our ICUs could be visited at any time during the week, by any Surveyor. There is however, a 'lead' Surveyor for Critical Care, Dr. Tony Taylor. We anticipate focused visits on 3A and 5.2. Dr. Taylor is an Emergency Physician at Fraser Health Region. He is also the President of a healthcare consulting firm, focusing on quality and patient safety, clinical operations, leadership development, and medical governance.



Some Tips For When Asked Questions

- The team on 3A and 5.2 do amazing work and welcome the opportunity to share that work with Surveyors!
- If we don't understand the question, just ask for clarification. Sometimes different facilities and systems use different language or terms, but the essence of care is the same.
- We don't need to know the answer to every question; we are human! The important piece is knowing how to find answers...for example, where do you find policies, how do you look up a medication, who do you ask for help.
- If the Surveyor asks you what you are most proud of, or what worries you, be honest in your answers.



What Makes YOU Proud?

One of the most frequent questions asked by an Accreditation Canada Surveyor, is "what makes you proud?" Our Team has lots of great answers to that question!

TEAMWORK
CARING

LEADERSHIP
BEST-PRACTICE

"I have to say that what makes me the most proud, in my day-to-day work, is the genuine care and attention paid by the front line staff (Nurses, RRTs, PTs, Dieticians, Ward Aids, & Clerks), to doing the best

for our patients in terms of optimizing their comfort and safety. No matter how busy or under-resourced we are, the patients and their needs always come first. Second to that, I would have to say the passion and diligence of those directly involved in monitoring and improving patient safety are things of which I am also proud – Trish and Cynthia are tireless in their unit advocacy and leadership. I am thankful for a lot things, but at the top of the 'at work' list is my gratitude for our quality leader, Karen Webb-Anderson, who brings her A-game every day, and holds us all accountable to do better and be better on a daily basis. No one cares more about Quality and Patient Safety than Karen!" – Dr. Sarah McMullen, Quality Committee Chair

- *"I'm extremely proud of our team and the excellent care they provide patients and families." – Tricia Daley, HSM*
- *"Teamwork is my answer. I'm always impressed with how the staff pull together to get the job done. There isn't a day that goes by that I don't hear one staff member offer to help another. We have a well-established inter-professional team and we work together to care for our patients." – Jenn Flemming, Pharmacist*
- *"Our collaborative approach to providing excellent patient care 24/7 days a week, all team members having a Voice! and most importantly being not just listened to but HEARD!" – Lesley Bishop, URN*
- *"The Team: I am so very proud of how our entire team, from both sites, will pull together to ensure that patients and their families receive our top-notch care. Our team goes beyond doctors and nurses and encompasses all members of the inter-professional team and this makes a huge difference for patients and their families as well as for our staff. Staff know that they can rely on each other's strengths to provide the best possible care every time." – Cynthia Isenor, HSM*

CARING

- *"What makes me proud is the ability to provide care despite circumstances. I was asked the other day how we, in ICU, keep working there despite the horrible things that have happened to our patients. I think that is what makes me proud – the ability to provide the very best care in spite of the terribleness of the story." – Elinor Kelly, URN*
- *"Seeing, and leaving behind happy patients and families makes me proud." – Dr. Volker Eichhorn*
- *"It can be as simple as watching for changes in vital signs, delivering a first dose antibiotic quickly, or mobilizing to the side of the bed for the first time. It can also be offering a shoulder and a box of Kleenex to a family in distress. All of these simple yet important steps can positively affect outcomes for both the patient and their family." – Pam Hughes, RN*
- *"I may not interact with patients directly but in my day-to-day I am proud of the interactions I have with colleagues or patients families where I walk away knowing that I've made their day a little easier just by caring and giving them my time." – Kristen Griffiths, Critical Care Admin*

LEADERSHIP

- *"One of the more exciting things for me has been the resurrection of the Professional Practice Council. A cry for more education by the bedside nurse has been addressed and hopefully answered by nurses themselves." – Pam Hughes, RN*
- *"Our leadership – locally, provincially and nationally. Within our small group of physicians, we provide leadership on many fronts, including organ donation, trauma, research, and medical education." – ICU Leadership Team at Mock Survey*
- *"Our welcome and successful re-introduction of novice nurses to critical care. Sustaining the URN role in our unit. RNs truly supporting this role in so many ways and management recognizing the ongoing need for clinical support/presence for our nurses. Ongoing dedication of our RN preceptors..." – Lesley Bishop, URN*

COMMITMENT TO BEST-PRACTICE

- *"Our interdisciplinary team, ready to care for whatever comes their way, ready to make changes in care processes to ensure we are current with best practice. Change on 3A and 5.2 is led by the frontline – look at our mobility project, our approach to delirium, and our med safety huddles." – ICU Leadership Team at Mock Survey*
- *"Quality initiatives and ongoing support and seeking out future best practices. Helping to implement in everyday clinical life. The Mobility project and ongoing successes, having great unit champions in Marlene and Elinor and our physio teams." – Lesley Bishop, URN*
- *"That's easy for me, I'm proud of our mobility protocol and our favourable results. We have improved the care to our patients and strengthen us as a team. I truly feel like we have a multi-disciplinary team in 5.2." – Tara Mercier, PT*
- *"Our work on pressure injury prevention. Despite caring for very sick patients, we implement strategies that work for them, and prevent harm." – ICU Leadership Team at Mock Survey*
- *"Our use of innovative professional roles to support best practice, for example, the Unit Resource Nurse, Unit-Based Pharmacy Technician, Clinical Pharmacy Coordinator, and a Critical Care Quality Leader." – ICU Leadership Team at Mock Survey*

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