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CCA ACCREDITATION REVIEW FINAL REPORT FOR GUELPH COMMUNITY HEALTH CENTRE

Date of the Site Visit: June 18-20, 2019
Date of the Report: August 28, 2019
Accreditation Term: September 9, 2019 to September 8, 2023

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SECTION 1: INTRODUCTION

A. 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.

B. ABOUT THIS REPORT

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

Section 1: Introduction

Section 2: An overview of the accreditation process

Section 3: A summary of accreditation review results

Section 4: Concluding words

SECTION 2: OVERVIEW

A. THE ORGANIZATION

The Guelph Community Health Centre (Guelph CHC) is a not-for-profit organization that is committed to reducing health inequities within the City of Guelph. This is accomplished through the delivery of comprehensive primary health programs and services that are uniquely tailored to meet the needs of both individuals and neighbourhoods facing the greatest barriers to health in its community.

The Guelph CHC is located in downtown Guelph, a city with a population of almost 132,000. For 30 years, Guelph CHC's inter professional team of family physicians, nurse practitioners, health promoters, outreach workers, social workers, early years staff, dietitians, and others have worked to deliver services centring around the needs of its priority populations: homeless; living on limited incomes; new Canadians with language barriers; those with moderate to severe mental health issues, addictions and/or disabilities; those without access to primary care; Indigenous community members; vulnerable children and their families and members of the LGBTQ+ community.

The Guelph CHC is guided by a community-based Board of Directors whose membership reflects the individuals and communities that the organization serves. The Board determines Guelph CHC's mission, vision, values, priority groups, and strategic directions, which are continually reviewed and adapted to meet the changing needs of the community. Board members and staff are equally committed to the organization's values of innovation, accessibility, accountability, sustainability, excellence and healthy communities.

A determining aspect of Guelph CHC's work is the focus on the underlying issues that affect people's health. By partnering with other agencies and sectors of the community, the Centre has addressed and positively impacted some of the social determinants of health that may be causing or prolonging poor health.

B. REVIEW TEAM

The review team was made up of:

- Michelle Westin, Senior Analyst-Planning Quality and Risk, Black Creek CHC (CCA Reviewer)
- Michelle Crogie, Children and Family Services Program Coordinator, Pinecrest-Queensway CHC (CCA Reviewer)
- Valentina Constantinescu, Quality Consultant, Patient Engagement Lead, St. Joseph's Healthcare Hamilton (CCA Reviewer)
- Jackeline Barragan, CCA Accreditation Specialist

C. THE REVIEW PROCESS

A preliminary report was sent to the organization on July 4, 2019. The organization's response was received on August 15, 2019, and reviewed by Jackeline Barragan, CCA Accreditation Specialist.

D. THE ACCREDITATION DECISION

The Canadian Centre for Accreditation is pleased to inform you that your accreditation has been approved. All requirements for accreditation were assessed as met.

The organization's accreditation term is September 9, 2019 to September 8, 2023.

E. SUMMARY OF ACCREDITATION REVIEW RESULTS AT THIS STAGE

Results are summarized by module.

The following CCA modules apply to this review:

- CCA Organizational Standards
- Community-Based Primary Health Care Standards

SECTION 3: FINAL ACCREDITATION REVIEW RESULTS BY MODULE

A. ORGANIZATIONAL STANDARDS MODULE

MAN Standards Required: 36

MAN Standards Achieved: 36

MAN Standards Must be met to achieve module: 0

LP Standards Total: 27

LP Standards Achieved: 27

LP Standards that must be met to achieve all components: 0

	MANDATORY STANDARDS						LEADING PRACTICE STANDARDS								
	Requirements		Results at Preliminary Stage		Results After Response Assessed		Requirements			Results at Preliminary Stage			Results After Response Assessed		
	M-Total	M-Must be met	M-Achieved	M-To be met for accreditation	M-Achieve	M-To be met for accreditation	LP-Total	LP-Must be met to achieve Component	LP-Must be met to achieve Module	LP-Achieved	LP-To be met to achieve Component	LP-To be met to achieve Module	LP-Achieved	LP-To be met to achieve Component	LP-To be met to achieve Module
By Component															
Governance	3	3	3	0	3	0	4	2	—	4	0	—	4	0	—
Stewardship	8	8	8	0	8	0	0	0	—	0	0	—	0	0	—
Risk and Safety	4	4	4	0	4	0	1	1	—	1	0	—	1	0	—
Organizational Planning and Performance	3	3	3	0	3	0	3	2	—	3	0	—	3	0	—
Programs and Services	5	5	5	0	5	0	1	1	—	1	0	—	1	0	—
Community	0	0	0	0	0	0	7	4	—	7	0	—	7	0	—
Learning Environment	3	3	3	0	3	0	2	1	—	2	0	—	2	0	—
Human Resources	5	5	3	2	5	0	6	3	—	6	0	—	6	0	—
Volunteers	1	1	1	0	1	0	2	1	—	2	0	—	2	0	—
Systems and Structure	4	4	4	0	4	0	1	1	—	1	0	—	1	0	—
Totals for Module	36	36	34	2	36	0	27	—	22	27	—	0	27	—	0

Detailed Results for the CCA Organizational Standards Module

i. Strengths in this Module

Organizational Planning and Performance: The review team saw evidence of how the strategic aim of strengthening a culture of excellence was demonstrated throughout all levels of the organization.

Staff, students, volunteers, management and board members are champions of the organization's shared vision of growing a healthy community together and removing barriers for all.

Quality Improvement is ingrained in the Centre's service model. Staff, students and volunteers are encouraged and supported in innovative thinking and testing out new ideas. The continuous monitoring, measuring and improving of programs and services' quality was evident in the positive feedback from all stakeholders as well as in demonstrated impact on health outcomes for clients and community.

Community: Strong engagement with community stakeholders was evident throughout this review. The Guelph CHC is a lead partner in the Poverty Task Force, and has participated in many projects aimed to reduce poverty in the community; the Centre has developed a social enterprise called the Seed Hub, which provides affordable healthy food to residents; the organization houses the Wellington Guelph Drug Strategy Manager position, an initiative striving to reduce the impacts of substance use on the community; the Guelph CHC works closely with Stonehenge Therapeutic Community, and through this partnership, provides primary care to residents who are completing their long-term residential drug treatment program; Guelph CHC is also a lead partner in Nurturing Neighbourhoods, along with public health and family & children's services, in delivering a new model focused on early help and building safe and resilient communities; the centre has also partnered with CMHA to bring the newly formed FACT Team to be integrated and co-located at the CHC.

Risk and Safety: The review team was impressed with the commitment and initiatives that the organization and the staff have done to build and sustain a culture of safety for all. Risk and safety are imbedded in everything and the number of activities and initiatives are testimony of the effort and dedication in this area. Some examples that the reviewers heard about are: safety plans developed for each client; de-escalation training offered to all staff and volunteers; visible signs throughout the building; cameras; security locks; and program huddles where weekly the staff brings any safety issue.

A robust education program is provided to all staff, volunteers and students along with an easy access to policies and procedures. Learnings and reviews of different policies and procedures are captured in an electronic report and reviewed by all staff and volunteers.

In all the safety and risk management initiatives and improvements, the team noticed a great combination of human talent with technology and support from the leadership. One example is the significant improvement done towards white code calls.

Volunteers: The volunteer program has a very strong recruitment and orientation practices that prepare and empower people to grow and to take leadership. There is a culture of trust, accountability and collaboration between staff, management and volunteers that are seen in many activities initiated and lead by the organization.

ii. Further Areas to Improve Quality in this Module

The organization is commended for its achievement of all Leading Practice Standards and indicators in this module.

The CCA review team offers the following comments by way of encouraging Guelph CHC in its continued growth and pursuit of quality.

Standard ORG-COM-3 (LP) - *Organizations that serve Aboriginal persons create respectful and effective relationships with Aboriginal communities and groups served.*

Indicator ORG-COM-3.1 *Formal advisory mechanisms are used to obtain meaningful input to the governance of the organization from Aboriginal communities served.*

- The review team heard how the board engages with the Indigenous Healing and Wellness Program Manager to understand the strategic directions of the self-determined program and the work of the Advisory Council. The team encourages Guelph CHC to continue its efforts in formalizing advisory mechanisms to get meaningful feedback from Indigenous communities served.

Standard ORG-SYS-1 (MAN) - The organization's operations are guided by a framework of relevant and up-to-date policies and procedures.

Indicators ORG-SYS-1.1 *Written policies and procedures address the following elements pertaining to the development, implementation and regular review of policies and procedures: -process for development and regular review of policies and procedures; -frequency of review; -roles and responsibilities for oversight, initiating reviews, consultation; - approval of policies and procedures; - how changes to policies and procedures are communicated; - version control, including maintenance of documentation and archiving of versions.*

- The review team saw the "Policy Development and Renewal" document. It covers all the elements mentioned above. The description of archiving and retention of policies can be improved to make the policy more specific and clear.

Standard ORG-SYS-5 (MAN) - *The organization has mechanisms in place to effectively manage any partnership that integrates administrative functions with those of another organization (for example, payroll, information technology).*

Indicator ORG-SYS-5.1 *Written partnership agreements are in place and cover the following: -roles; responsibilities; -accountabilities; - liability; -financial details; - dispute resolution.*

- The review team was impressed with the number of partnerships established by the organization. The team encourages Guelph CHC to include all elements mentioned in the indicator in all agreements to ensure consistency and to manage its partnerships more effectively.

No immediate action is required for accreditation in the above section. However, CCA strongly encourages Guelph CHC to continue to improve upon the areas identified.

B. COMMUNITY-BASED PRIMARY HEALTH CARE STANDARDS MODULE

MAN Standards Required: 14

MAN Standards Achieved: 14

MAN Standards Must be met to achieve module: 0

LP Standards Total: 6

LP Standards Achieved: 6

LP Standards that must be met to achieve all components: 0

	MANDATORY STANDARDS						LEADING PRACTICE STANDARDS								
	Requirements		Results at Preliminary Stage		Results After Response Assessed		Requirements			Results at Preliminary Stage			Results After Response Assessed		
	M-Total	M-Must be met	M-Achieved	M-To be met for accreditation	M-Achieve	M-To be met for accreditation	LP-Total	LP-Must be met to achieve Component	LP-Must be met to achieve Module	LP-Achieved	LP-To be met to achieve Component	LP-To be met to achieve Module	LP-Achieved	LP-To be met to achieve Component	LP-To be met to achieve Module
Community-Based Approach	2	2	2	0	2	0	3	2	—	3	0	—	3	0	—
Delivery of Quality Programs and Services	7	7	6	1	7	0	3	2	—	3	0	—	3	0	—
Service Safety	5	5	3	2	5	0	0	0	—	0	0	—	0	0	—
Totals for Module	14	14	11	3	14	0	6	1	5	6	1	0	6	1	0

Detailed Results for the Community-Based Primary Health Care Standards Module

iii. Strengths in this Module

Community Based Approach: A Health Promotion approach was evident throughout all programs and services. Even though there is only one official Health Promotion position, all staff have health promotion as an integral part of their role. Staff are oriented to health promotion strategies and receive training during on boarding. The collaborative and inter-professional teams that are assigned to client care facilitate referral processes and care coordination that strengthens the quality of service delivered to clients. This has also resulted in reduced wait times and increased access to appropriate, and timely care.

iv. Further Areas to Improve Quality in this Module

The organization is commended for its achievement of all Leading Practice Standards and indicators in this module.

SECTION 4: CONCLUSION

The CCA review team appreciates the work undertaken by Guelph Community Health Centre to prepare for its review and thanks them for the warm welcome they received while on site. In particular, the Centre's accreditation team was very knowledgeable and well prepared.

The evidence submitted and data gathered through the site visit confirms that Guelph CHC is an organization that puts clients first. Guelph CHC's board members, staff and volunteers are committed to meeting the needs of the individuals and groups served.

The organization takes key roles in community initiatives. It was illustrated by their involvement in community planning initiatives and by developing productive and meaningful partnerships aimed to reduce service gaps for those in need, such as the Poverty Elimination Task Force, the Oral Health Action Committee, the Wellington Guelph Drug Strategy, and the SEED Hub, to name a few.

The enthusiasm demonstrated during the review by the staff regarding their roles and service provision was infectious. The staff's willingness, not only to support their clients, but each other was evident in every interview.

Guelph CHC is a vibrant and forward-thinking organization that through its skilled leadership, management and staff will continue to address its clients' needs and its own organizational growth.

CCA commends the organization's commitment to quality and continuous improvements, and encourages Guelph CHC to address the areas for further improvement.

Congratulations on achieving your accreditation, we are very pleased with your performance in achieving 50 out of 50 Mandatory Standards and 33 out of 33 Leading Practice Standards included in the Organizational and the Community Based Primary Health Care Modules.

CCA is pleased to accredit Guelph Community Health Centre for a four-year term.