Driving Sustainable Change through a People-Centred Approach

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HS • **)**



WHY does healthcare need to change today?

WHAT is the problem we are trying to solve?





700 People in 20 Countries:

What we heard:

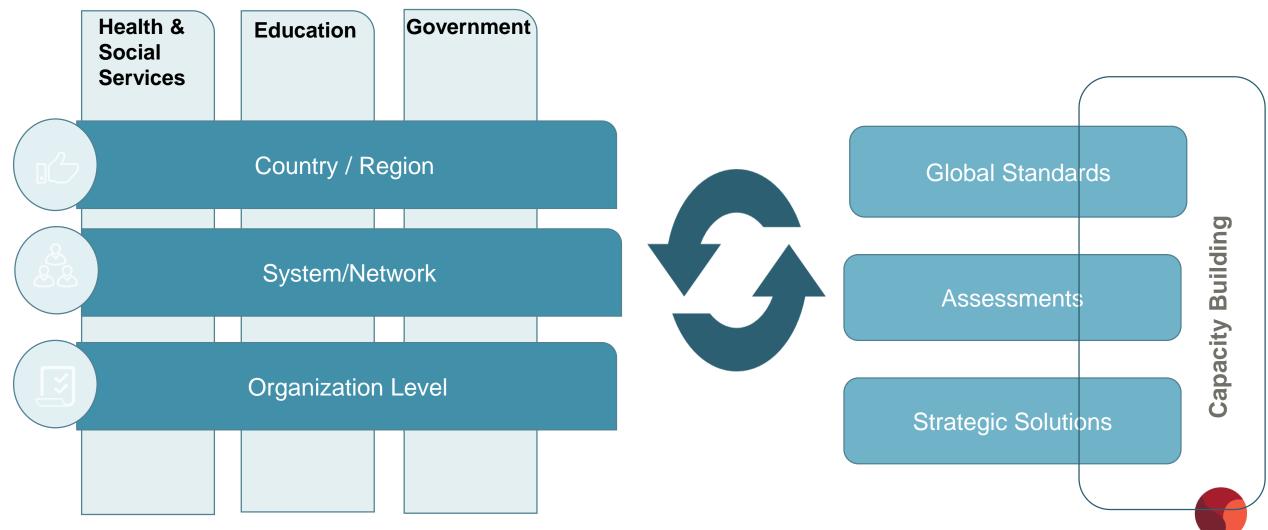
- Connect better with one another
- / Listen to all voices
- Boil it down to what matters
- Design systems and solutions for people
- Make it easier to do the right thing
- Link data, decisions and practices to better health



HSO Research Findings 2016

People Centred Co- Design 2 With 10 large-scale changes we can deliver more value 3 Connected / 4 Ecosystem that better responds to **Integrated Care** local needs 5 6 Continuous Improvement **Capacity Building** ACCREDITATION CANADA 8 Agile Global + Local 9 10 Partner Impact

Our approach



Connecting

Patients/ Citizens

• Individuals, Associations, Networks



- Colleges & Universities
- Regulatory / Bodies
- Associations /

Health and Social Service Providers and Networks:

- Home & Community Services
- Mental Health Care
- Primary Care
- Lab/ Diagnostics
- Acute Care Hospitals
- Long Term Care
- Public Health Units
- Voluntary and Not-for-Profit, Health and Social Services
- Other health & well-being sectors
- ETC...



Policy Makers:

- Governments
- Ministries
- Health and Social Services Agencies, Authorities, and Regulators
- Global Summits G20



Encourage cultures of LEARNING

COLLABORATIVE learning fosters continuous improvement & innovation



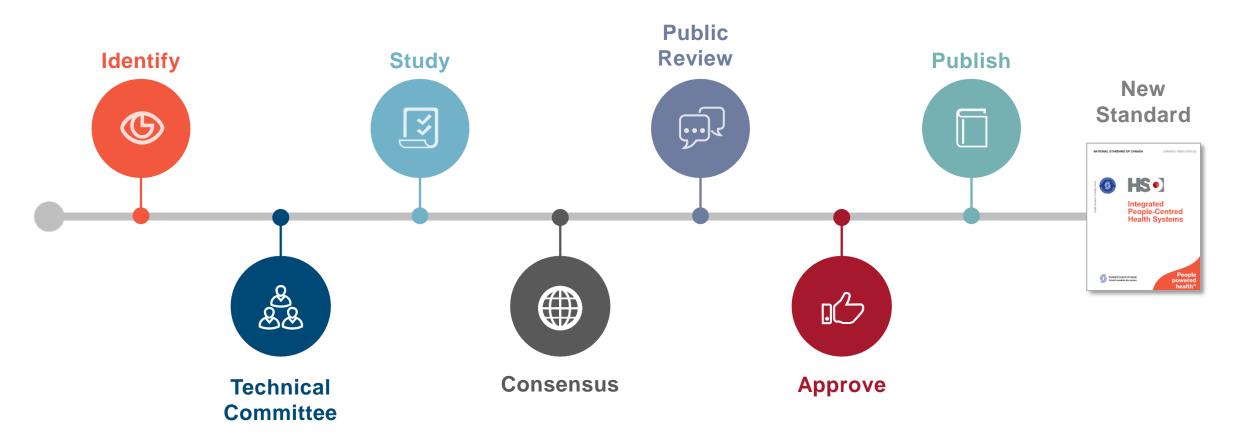
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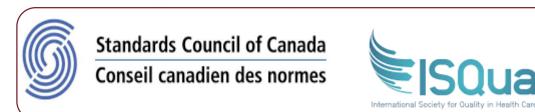


Global standards & innovative assessment methods are foundation for change

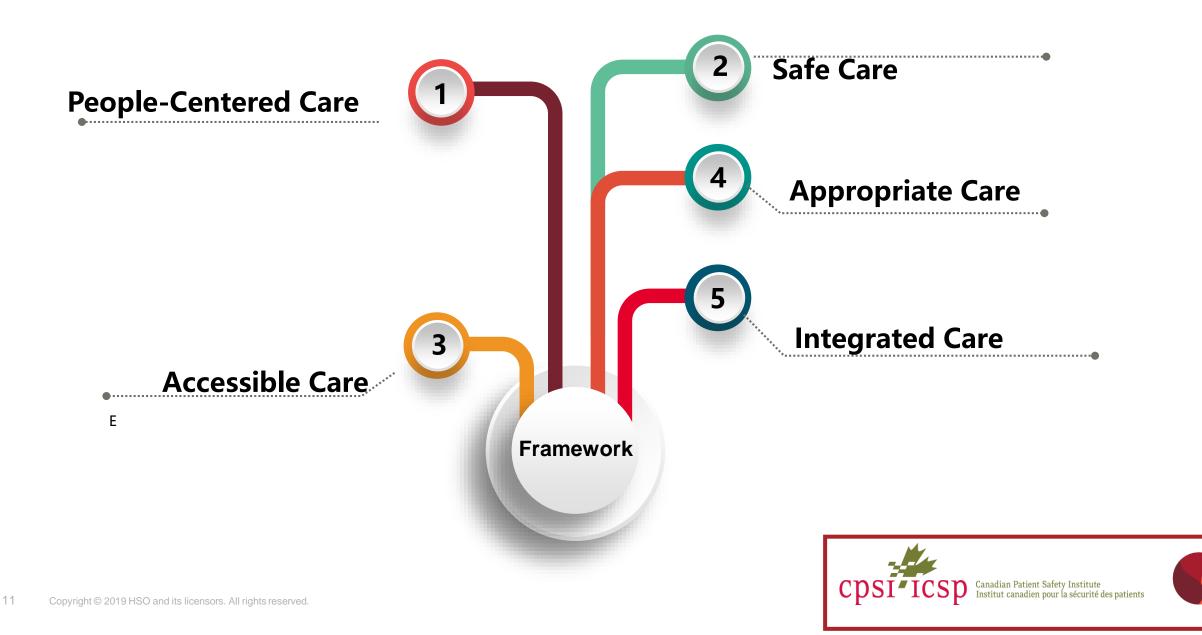


HSO has official status as a Standards Development Organization (SDO)

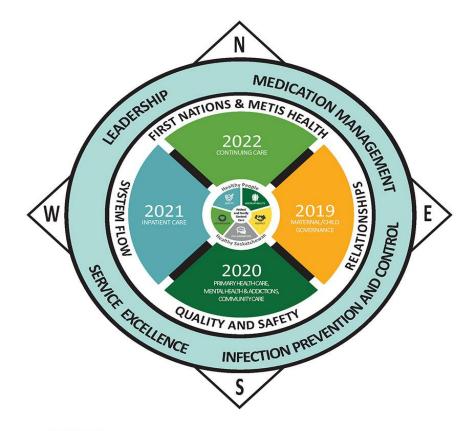




National Goals: Canadian Quality & Safety Framework



Customized Approach to reflect local priorities & culture Saskatchewan Health Authority (SHA)



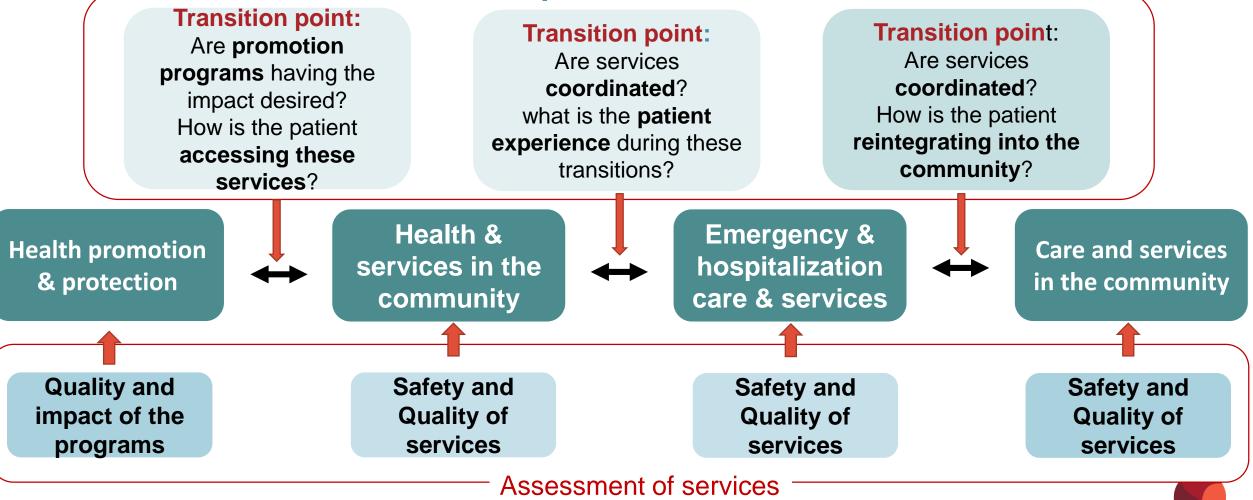
Our Mission We work together to improve our health and well-being. Every day. For everyone.

- 12 RHA transformed to 1 health authority
- Co-design model to match SHA structure, priorities and aspirations
- Specific focus– patients' and First Nations and Metis' voice to be central
- Continuous accreditation sequential –each year specific areas; and G/L;IPAC; MM etc continuous
- Circular model chosen to represent holistic health and the Medicine Wheel with patients and family centered care at its core



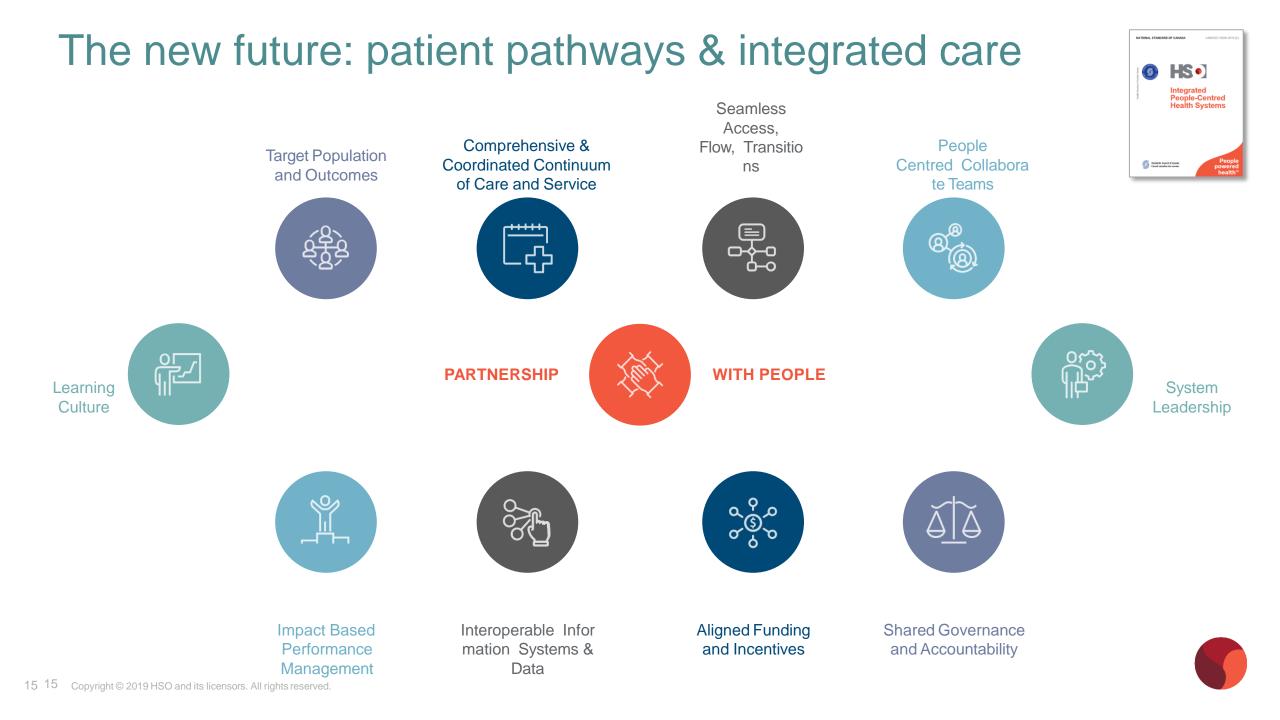
Quebec: Patient pathways across the continuum

People Centred Care



"Organizations need patients to tell them what they are doing well and where they can improve. Patients are hidden gold that have yet to be tapped into. We can make amazing changes together." Heather Thiessen, Patient Surveyor, Vancouver Island Health Authority







Working with governments on strategic solutions can help create winning conditions for change



Ministry of Public Health Lebanon (MoPH)

Primary Healthcare Project (since 2010)

- The development of Lebanon's first national PHC standards
- Ongoing training for staff & surveyors
- Co-surveys (joint teams of surveyors Lebanese and Canadian)

- 126 PHC centers enrolled in accreditation process, 52 centers accredited
- Specialized training for PHCs
- Project supported by the World Bank



Ministry of Public Health, Qatar

- Creation of national licensing protocols and process
- Unique system of integrating licensing with accreditation
- Turn-key accreditation solution based on an internationally-recognized program (standards, process, education)
- Creation of systems and capacity to manage the program independently within MOPH Qatar

Ministry of Health, Kuwait

2008 - Present

- Co-Created a customized National Hospital Accreditation Program (for public sector facilities)
- Successful implementation of the national hospital accreditation program since 2010
- Specialized training in health care facilities
- Continuous knowledge exchange between Kuwaiti and Canadian surveyors through cosurvey model
- Application of Qmentum International[™] standards for primary care sector



European Reference Networks For People with Rare Diseases

- Design of Standards and Assessment Program for the establishment of ERNs across EU 28 Member States
- Development of Operational criteria that incorporates EU specific regulations, legislation, professional standards
- Patient Groups partnered at every step
- Assessment of ERNs against the network standards





Implementation Support - Vanessa's Law

- Vanessa Young died in 2000, at the age of 15, of a cardiac arrhythmia after taking cisapride (Prepulsid®) as prescribed.
- A campaign for increased regulation of therapeutic products subsequently led to greater powers for Health Canada to request safety data from hospitals and industry about drugs and medical devices.
- Vanessa's Law was enacted in 2014 and the mandatory reporting requirements come into effect December 16, 2019.
- Government Funded Joint Venture with HSO to ensure support for mandatory reporting & ongoing learning







Sustainable change takes time

The future is **now**.



Our vision: Quality Health Services for ALL



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please join us!

www.healthstandards.org

www.accreditation.ca



Together, we can make a difference

