



Community Accreditation and Quality Improvement Program

Frequently Asked Questions (FAQs)

Accreditation is Quality Improvement!

Accreditation is an on-going quality improvement process. A collaborative approach for health organizations to celebrate what is working, identify what is not working and implement new ways to achieve organizational and service excellence.

It provides a road map for improving the care and safety of your community health and services, and is a team commitment to review your plans, processes and practices for better health and wellness outcomes.

1. What is health services accreditation?

Accreditation is a voluntary and peer process guided by a recognized accrediting body. A team effort and strengths based approach that reviews, defines, measures, improves and reports on the quality, safety, efficiency and practice of health service development and delivery. A process that:

- Aligns improvement efforts that are led by a community's culture, protocols and own ways of knowing, doing and being
- Provides direction to identify and address areas for improvement against standards
- Recognizes emerging service needs and priorities
- Reinforces current successes and validates what is working
- Addresses issues on a systems level not on a program or individual level
- Ensures that attention is given to service and site safety for community and staff
- Reduces risks and liabilities and increases accountabilities
- Strengthens relationships with staff, community and other service partners

2. How is accreditation linked to Quality Improvement (QI)?

Pursing and achieving accreditation is one step in continuous quality improvement and

can serve as one outcome measure of quality improvement along with other activities that services already complete such as - health planning, community client care plans, program evaluation and risk management. It is an opportunity to assess services, identify areas for improvement and target efforts for effective and meaningful change. All improvement initiatives further learning and foster an organizational culture of quality, cultural safety and service excellence.

3. What have First Nations communities shared about the benefits of pursuing health services accreditation?

- Enables leadership to develop a 'roadmap' for safety and quality improvement
- Builds a team approach for identifying goals and meeting results
- Encourages valuable ideas and actions to come forward as leading practices
- Strengthens an organization's structure, stability and systems
- Builds better relationships with other health systems and health partners so that services received are more consistent, relevant, timely and effective
- Provides public recognition and increased credibility of services
- Enhances an organization's commitment to community health and wellness





4. Is accreditation the same as certification, licensing or evaluation?

No, these are different processes with different requirements and outcomes. Accreditation is not a performance measurement of services (evaluation), a professional designation of your staff (certification) or maintenance of regulatory requirements (licensing). It is a process guided by certified accrediting bodies to assess and improve the quality and safety of health services against internationally supported standards of best/wise practice and excellence.

5. What is the accreditation process, timelines and key definitions?

Each accreditation process may differ, however there are several components that are essentially common to all accreditation programs.

Accreditation - an on-going quality improvement process that organizations use to assess the quality and safety of their services against a set of pre-determined standards.

Accrediting Body - a recognized and certified organization that provides accreditation status.

Self-Assessment - a review that identifies organization-wide strengths and areas for improvement.

Standards - best practices that organizations strive to attain against an international set of criteria, guidelines and measures.

Client and Staff Safety - as defined by an accrediting body's standard to ensure the highest level of safety and care when giving and receiving community client and centred services.

Surveyors - peer reviewers who assess and complete the organization based survey.

Survey/Peer Review - experienced peer surveyors who are invited from similar service type organizations to review

processes, procedures, plans and operations to support alignment with assigned accreditation standards as well as provide suggestions to improve overall service quality.

Awards - recognition by an accrediting body that the required safety and quality standards have been met and/or maintained by a service delivery organization. To be recognized as providing high level quality care and being accredited using the same standards as those in similar peer and health services settings across the country, can be a meaningful motivator that often leads to improved relationships within and outside of the workplace.

Quality Improvement Plans - Accreditation assists organizations to identify and prioritize areas for improvement.

Continuous Quality Improvement - a coordinated approach to continuing cycles of measurement, analysis and improvement; an opportunity to assess, monitor and implement identified and needed improvement projects for better system and process performance as well as people development.

Performance Measures - identified indicators that track potential improvements; ensuring improvements are effective while meeting identified community priorities and service outcomes.

6. How do you know if you are ready to pursue accreditation?

Your leadership, staff and organization:

- Is committed to continuous quality improvement over the long term
- Has adequate infrastructure to support quality and safety improvements such as supportive leadership, human resource capacity, policies/procedures, demonstrated financial stability, etc.
- Is aware of the effort and investment required to achieve and further organizational change
- Is interested in being a learning and growing organization



7. What are some potential outcomes for being accredited?

Accreditation can increase the credibility of health services provided by First Nations by establishing that the health services they provide are comparable to, or better than those available in their geographical community and/or in partnership with other health system providers. As an ongoing quality management process, accreditation can further organizational and health service leadership; strengthen health outcomes; support sustainability and enhance programs and services growth. This process demonstrates to community members and partners that the organization is committed to continuous quality improvement, culturally safe care and service excellence.

8. What is the FNHA Community Accreditation and Quality Improvement (CAQI) Program?

This program partners directly with interested BC First Nations to support health services accreditation and quality improvement (QI) efforts by:

- Promoting awareness, understanding and benefits of accreditation and QI to BC First Nations health and addiction recovery healing services
- Providing on-going funding and support to program participants who are working towards or maintaining their accreditation status as well as peer based support via the Quality Improvement and Safety Network
- Working in partnership with participating health and addiction recovery healing services to support a BC First Nations approach that is relevant, responsive and respectful
- Linking accreditation and quality improvement to related health service priorities, practices and processes; such as, First Nations governance, health leadership development, comprehensive community health and wellness planning and evaluation
- Providing on-going advice, support, consultation and resources as related to accreditation and continuous quality improvement

9. How does the program support FNHA's Seven Directives?

In striving for excellence through continuous quality improvement, FNHA's commitment to supporting community based accreditation is guided by FNHA's Seven Directives and the First Nations Perspective on Health and Wellness.

10. Who does the program partner with?

Accreditation is a process based on a collaborative partnership that involves the organization seeking accreditation, chosen accrediting body and FNHA. Program participants also join the FNHA Quality Improvement and Safety Network.

11. Who is eligible for CAQI program funding?

The FNHA acknowledges the benefits of health services accreditation and has been supporting organizations actively engaged in accreditation activities. Once a health service self-determines to pursue accreditation, the FNHA Program Lead will confirm available FNHA funding. The program also aligns with FNHA Regional plans and programs to support organizations new to the process as well as those who are maintaining their accreditation status.

An applying community/organization must meet the following criteria in order to receive FNHA funding support for accreditation and quality improvement efforts:

- BC First Nation/Tribal Council/Health Society
- Established and on-going funding arrangement with FNHA for health programs and services
- Interested in the accreditation of health programs and services
- Secured commitment and support for process by leadership and health staff; e.g. Chief and Council/Board of Director Resolution
- Registered with a Canadian-based and certified accrediting body; e.g. accepted as a new client.



12. What is the First Nations Quality Improvement and Safety (QIS) Network?

The FNHA QIS Network provides a forum for BC First Nations health and treatment organization representatives to provide leadership and capacity building regarding accreditation as well as support one another in their accreditation journey and on-going quality improvement initiatives. Currently the Network is comprised of 32 health centers and 9 addiction recovery services in all Health Authority regions of BC. Network activities and meetings are an opportunity for CAQI program participants to work with fellow colleagues, access new learning opportunities and resources as well as share wise and leading practices.

13. What are the steps for getting involved with the CAQI program?

- Consider accreditation and quality improvement of your services
- Request an FNHA presentation to health staff and/or leadership
- Assess readiness for accreditation – FNHA Accreditation Readiness Tool
- Ask questions and get answers – FNHA Program Lead, Accrediting Body and peer health organizations in the process
- Discuss and confirm FNHA funding and support for process
- Secure a Chief and Council/ Board of Director Resolution
- Research, choose and apply with an Accrediting Body
- Submit resolution and accrediting body letter of acceptance to FNHA Program Lead
- Await FNHA Program Lead's review of application for FNHA funding support
- Secure funding support and needed organizational resources
- Meet with chosen Accrediting Body and start your accreditation and quality improvement journey!

14. Who do I contact about the FNHA CAQI Program?

For more information on the program and to request a presentation to health leadership and staff, contact:

CAQI Program

CommunityQuality@fnha.ca