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# CCA ACCREDITATION REVIEW FINAL REPORT FOR SEAWAY VALLEY COMMUNITY HEALTH CENTRE (SVCHC)

**Date of the Site Visit: July 3-5, 2018**  
**Date of the Report: August 17, 2018**  
**Accreditation Term: August 17, 2018 to August 16, 2022**

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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 to date. Comments are illustrative and not comprehensive. The report includes the following:

Section 1: Introduction

Section 2: An overview of the accreditation process and results

Section 3: Detailed accreditation review results by module

Section 4: Conclusion

## **SECTION 2: OVERVIEW**

### **A. THE ORGANIZATION**

Seaway Valley Community Health Centre (SVCHC) is a charitable, not-for-profit community-led organization created to provide primary health care, health promotion and community development services to residents of Cornwall and Stormont, Dundas and Glengarry (SDG). SVCHC is designed to address the issue of equity for citizens facing barriers when accessing the health care system.

SVCHC understands health in its broadest sense. Health is not only affected by genetic makeup, by nutrition or fitness level, but also by opportunities to work, play, learn and contribute and belong to a community. SVCHC makes special efforts to serve people who have a higher risk of poor health, or who have difficulty accessing health care because of language or cultural barriers, poverty or isolation. In all the organization's activities, they pay special attention to the social, emotional, and financial needs of their clients, since these are the essential building blocks of good health. In their community, those facing access barriers to primary care include the general public who are without a primary care provider (family physician or nurse practitioner), low income individuals and families, seniors and new immigrants to Canada.

The SVCHC interdisciplinary team works closely with community health and social service partners to deliver and link its clients to appropriate services. The service providers team consists of physicians, nurse practitioners, nurses, social worker, dietitian, health promoter, community health workers, physiotherapist, medical secretaries, administration staff, volunteers and students. Together they work to target issues impacting the community's health and wellness and deliver a number of health promotion and community development initiatives to support local needs.

### **B. REVIEW TEAM**

The review team was made up of:

- Cathy Kurelek, Health Promoter, Carea Community Health Centre (CCA Team Leader)
- Racquel Hamlet, Social Worker/Therapist, TAIBU Community Health Centre (CCA Reviewer)
- Jaskaran Singh Thind, Council Member, GLG (CCA Reviewer)
- Jackeline Barragan, Accreditation Manager, Canadian Centre for Accreditation

### **C. THE REVIEW PROCESS**

A preliminary report was sent to the organization on July 20, 2018. The organization provided their response on August 7, 2018.

Following a review of the response, all requirements for accreditation were assessed as met.

### **D. THE ACCREDITATION DECISION**

The Canadian Centre for Accreditation is pleased to inform you that your accreditation has been approved.

## **E. SUMMARY OF ACCREDITATION REVIEW RESULTS**

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

Results are summarized by module. The following CCA modules apply to this review:

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

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. A component is met when all its Mandatory Standards and 50% of its Leading Practice Standards are met. If there is one Leading Practice Standard, it must be met.

## SECTION 3: FINAL ACCREDITATION REVIEW RESULTS BY MODULE

### A. CCA ORGANIZATIONAL STANDARDS MODULE

MAN Standards Required: 29

MAN Standards Achieved: 29

MAN Standards Must be met to achieve module: 0

LP Standards Total: 27

LP Standards Achieved: 24

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

Additional LP Standards that must also be met to achieve total of 80% of LP Standards across module: 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	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
Governance	3	3	3	0	3	0	4	2	—	4	0	—	4	0	—
Stewardship	5	5	4	1	5	0	0	0	—	0	0	—	0	0	—
Risk and Safety	4	4	2	2	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	—	5	0	—	5	0	—
Learning Environment	1	1	1	0	1	0	1	1	—	0	1	—	1	0	—
Human Resources	5	5	5	0	5	0	6	3	—	6	0	—	6	0	—
Volunteers	0	0	0	0	0	0	3	2	—	2	0	—	2	0	—
Systems and Structure	3	3	1	2	3	0	1	1	—	1	0	—	1	0	—
<b>Totals for Module</b>	<b>29</b>	<b>29</b>	<b>24</b>	<b>5</b>	<b>29</b>	<b>0</b>	<b>27</b>	<b>—</b>	<b>22</b>	<b>23</b>	<b>1</b>	<b>0</b>	<b>24</b>	<b>0</b>	<b>—</b>

## Detailed Results for the CCA Organizational Standards Module

### I. Strengths in this Module

**Governance:** SVCHC has adopted an approach to governance that clearly distinguishes the role of the board of directors from the role of management. The board demonstrates a clear understanding of their role vis-a-vis Executive Director's role and of the structures that support these roles and relationships. Board orientation, training and development are important elements that contributed to this picture that reflect and support effective governance.

The board has systems and structures, such as board committees, that support its work. Regular board evaluation and the consensus decision-making model, support effective decision-making and provides oversight to the board.

The board of directors has now also a thoughtful recruitment process that is geared to ensuring its diversity, effectiveness, stability and renewal. The board has ensured that its composition reflects the diversity of the communities it serves with a good representation from both the rural and urban population.

**Organizational Planning and Performance:** The review team heard from board members and staff that the organization is guided by a strategic plan. The board approved the Strategic Plan and it is shared with all stakeholders by posting it on the SVCHC website and the Annual Report. SVCHC's vision and mission set the context for planning as it is demonstrated by their four strategic objectives: integration, access, quality and sustainability, and nurturing its work environment.

**Programs and Services:** The evidence provided shows that the organization is very strong on accommodating the diverse needs of clients in regard to accessibility, hours of service, transportation, flexibility and home based services. Client spoke highly of all the staff that go out of their way to make them feel comfortable.

Interviewed clients felt that they were referred to the most appropriate programs and services based on their needs. They felt that they were given the 'gold standard' of care and that they had ample options as to what services could assist with their issues.

**Community:** Partnerships in the community are strong. SVCHC is a well-known and respected organization so other agencies in the community are eager to collaborate and be a part of the legacy that is being built. All the partnerships are relevant to the objectives of the agency.

Advocacy work is planned and done in collaboration with community members, and/or regional, provincial and/or national groups. Staff openly advocates for the needs of clients that are both discussed by clients and observed by providers, such as, the need for an oral health program, poverty reduction, and food insecurity issues.

**Human Resources:** The organization promotes a positive work environment for staff. Management's open door policy, regular staff surveys, acceptance of staff suggestions and a willingness to act upon them help to support improvements that keep it positive.

The organization respects staff experience (lived experience and community roots) and looks for this wherever possible when recruiting new staff. Respect and trust is evident in the autonomy staff have in program planning and delivery.

The review team was impressed by the fact that staff is provided with a comprehensive orientation, have support from each other, get training opportunities, and have clear succession plans for key roles. SVCHC has developed a strong volunteers base and made significant efforts in recruiting human resources that reflect diverse communities, such as the LGBTQ community.

**Learning Environment:** SVCHC offers students a comprehensive placement where they receive a full community experience and gain an understanding of how to work with complex clients. Students are given clear concise instructions as to what is expected of them at the centre.

**Systems and Structures:** SVCHC has put in place policies and practices to safeguard privacy and keep information secure. In addition, the organization has taken measures to ensure appropriate and responsible use of information systems and electronic communications, congruent with the organization's service philosophy. A good example of it is the care taken regarding the use of flash drives, security passwords, and FOBS for NOD to protect privacy of client records and ensure confidentiality.

## II. Further Areas to Improve Quality in this Module

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

The CCA review team offers the following comment by way of encouraging SVCHC in its continued growth and pursuit of quality.

**Standard ORG-RS-5 (LP )** *The organization has a system in place to manage complaints and concerns from persons served and from members of the public.*

- **Indicator ORG-RS-5.3** *The organization tracks the themes of the complaints, monitors the outcomes and reports to the board of directors at minimum annually on complaints and actions taken.*
  - The review team observed that the Executive Director reports to the board on both the incident report and the complaints and they are integrated. SVCHC may benefit from separating the incident report from the complaints report in order to identify trends and target actions.

No immediate action is required for accreditation in the section: Further Areas to Improve Quality. However, CCA strongly encourages SVCHC to continue to improve upon the area 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

Additional LP Standards that must also be met to achieve total of 80% of LP Standards across module: 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	7	0	7	0	3	2	—	3	0	—	3	0	—
Service Safety	5	5	4	1	5	0	0	0	—	0	0	—	0	0	—
<b>Totals for Module</b>	<b>14</b>	<b>14</b>	<b>13</b>	<b>1</b>	<b>14</b>	<b>0</b>	<b>6</b>	<b>—</b>	<b>5</b>	<b>6</b>	<b>—</b>	<b>0</b>	<b>6</b>	<b>—</b>	<b>0</b>

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

### I. Strengths in this Module

**Community Based Approach:** Staff is actively engaged in health promotion on a daily basis. Staff ensure that they are doing health promotion for the benefit of the clients and it is reflected in the high success rate of clients that are in better health as a result.

SVCHC works actively to reduce health disparities amongst its client population. Staff work very hard at ensuring that clients' needs are met regardless of how complex those needs are. Staff adapts a "meet the client where they are" approach, which is beneficial to them in the long term.

Clients' opinions matter in the implementation of programs and services. When suggestions are made for improvements, extensions of programs, and changes to hours that a program is offered, staff adhere to meeting the clients' needs.

**Delivery of Quality Programs and Services:** During the client journey, clients explained that they felt very involved in their own care. They did not feel the providers forced them to do things they did not want to do or pushed their own agenda. They felt as though their voice mattered in every step of their care.

The collaborative approach to health care was appreciated by clients. They explained that they felt staff cared when referrals were made for them to see specialists both internally and externally. They appreciated not having to tell their story twice because providers share their information through the EMR system.

Clients indicated that they have more control over their lives and their health with the help that SVCHC has been able to provide them with. They used phrases like "feeling empowered", "regaining confidence that was lost", and "getting a fresh start." Clients felt that despite their comorbidities they were given skills to exercise more control over their decisions about their health.

### 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.

## SECTION 4: CONCLUSION

CCA and the review team appreciates the work undertaken by SVCHC to prepare for its review and the warm welcome received while on site.

The evidence submitted and the site visit have confirmed that SVCHC is an organization that understands clients' needs and "meet them, where they are at". It also showed that the organization uses a variety of mechanisms to accommodate clients' needs concerning accessibility, such as transportation, interpretation, child minding, and extended service hours. SVCHC uses feedback from clients and community partners to improve the services and programs. It is very clear that the client voice is important and not only in care provision, but also in overall service delivery. This was visible in your performance against the community-based primary health care standards.

The review team was impressed by the sense of family among the staff, the positive work environment, and by staff professionalism and use of best practice models to benefit their clients.

SVCHC works actively to reduce health disparities amongst its client population. They do it by participating and leading advocacy campaigns, collaborating with local organizations to offer and coordinate health programs, and by addressing the needs of specific populations, such as seniors, LGBTQ community, people who have COPD, individuals living with a chronic condition, people with diabetes, and individuals facing mental health issues.

The organization has a solid base of volunteers that are well trained and supported, as well as, a significant number of students who had clear and concrete learning agreements and staff support to ensure them a meaningful learning experience.

SVCHC has policies and structures in place to support quality improvement and excellence within the organization.

Congratulations in meeting all 43 mandatory standards in both the Organizational and Community Based Primary Health Care standards and 30 out of 33 of the leading practices in both modules.

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