



Bermuda Hospitals Board

Accredited

Bermuda Hospitals Board has met the requirements of the Qmentum accreditation program and has shown a commitment to quality improvement.

Bermuda Hospitals Board is participating in the Accreditation Canada Qmentum accreditation program. Qmentum helps organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed.

Organizations that become accredited with Accreditation Canada do so as a mark of pride and as a way to create a strong and sustainable culture of quality and safety.

Accreditation Canada commends **Bermuda Hospitals Board** for its ongoing work to integrate accreditation into its operations to improve the quality and safety of its programs and services.

Bermuda Hospitals Board (2023)

Bermuda Hospitals Board (BHB) encompasses three clinical sites King Edward Memorial Hospital (KEMH), Mid-Atlantic Wellness Institute (MWI) and the Lamb Foggo Urgent Care Center. BHB is mandated through legislation to provide mental health and acute care for the people of Bermuda. BHB's operations are governed by a Government appointed Board. BHB serves approximately 64,000 people including visitors. BHB offers an extensive range of services and programs to meet the needs of the community. KEMH provides acute and long term care services along with diagnostic imaging and rehabilitation. MWI offers inpatient and outpatient mental health services, substance abuse and developmental disabilities.

Accreditation Canada

We are independent, not-for-profit, and 100 percent Canadian. For more than 55 years, we have set national standards and shared leading practices from around the globe so we can continue to raise the bar for health quality.

As the leader in Canadian health care accreditation, we accredit more than 1,100 health care and social services organizations in Canada and around the world.

Accreditation Canada is accredited by the International Society for Quality in Health Care (ISQua) www.isqua.org, a tangible demonstration that our programs meet international standards.

Find out more about what we do at www.accreditation.ca.

Demonstrating a commitment to quality and safety

Accreditation is an ongoing process of evaluating and recognizing a program or service as meeting established standards. It is a powerful tool for quality improvement. As a roadmap to quality, Accreditation Canada's Qmentum accreditation program provides evidence-informed standards, tools, resources, and guidance to health care and social services organizations on their journey to excellence.

As part of the program, most organizations conduct an extensive self-assessment to determine the extent to which they are meeting the Accreditation Canada standards and make changes to areas that need improvement. Every four years, Accreditation Canada surveyors, who are health care professionals from accredited organizations, visit the organization and conduct an on-site survey. After the survey, an accreditation decision is issued and the ongoing cycle of assessment and improvement continues.

This Executive Summary highlights some of the key achievements, strengths, and opportunities for improvement that were identified during the on-site survey at the organization. Detailed results are found in the organization's Accreditation Report.

On-site survey dates

November 6, 2023 to November 10, 2023

Locations surveyed

- **3** locations were assessed by the surveyor team during the on-site survey. Locations and sites visited were identified by considering risk factors such as the complexity of the organization, the scope of services at various sites, high or low volume sites, patient flow, geographical location, issues or concerns that may have arisen during the accreditation cycle, and results from previous on-site surveys. As a rule, sites that were not surveyed during one accreditation cycle become priorities for survey in the next.
- All sites and services are deemed **Accredited** as of the date of this report.

See **Appendix A** for a list of the locations that were surveyed.

Standards used in the assessment

- **26 sets of standards** were used in the assessment.

Summary of surveyor team observations

These surveyor observations appear in both the Executive Summary and the Accreditation Report.

During the on-site survey, the surveyor team undertook a number of activities to determine the extent to which the organization met the accreditation program requirements. They observed the care that was provided; talked to staff, clients, families and others; reviewed documents and files; and recorded the results.

This process, known as a tracer, helped the surveyors follow a client's path through the organization. It gives them a clear picture of how service is delivered at any given point in the process.

The following is a summary of the surveyor team's overall observations.

Bermuda Hospitals Board (BHB) is a Quasi Autonomous Non-Governmental Organization mandated through legislation to provide quality mental health and acute medical care for the people of Bermuda. The organization comprises King Edward VII Memorial Hospital (KEMH), the Mid-Atlantic Wellness Institute (MWI) and the Lamb Foggo Urgent Care Centre.

BHB is governed by a dynamic and engaged government-appointed Board. The current members bring a diversity of background, experience and expertise, and consider themselves quite representative of the Bermudian population. The Board ensures oversight of key BHB performance and activities and provides guidance and strategic direction to the organization.

In addition to the Board, BHB also has a competent and engaged leadership team and workforce. Employees express appreciation for their colleagues and the support received from managers.

The organization maintains a close relationship with the community it services. It also makes an effort to coordinate with other partners in an attempt to clarify roles and responsibilities in order to ensure continuity of services. An additional complexity stems from the disparate insurance coverage status of the population and the different remuneration models for healthcare providers in the private and public sectors.

Since the last Accreditation Canada survey in 2019, and despite the passage of a global pandemic, BHB has completed a new strategic planning process, resulting in a 2021-2026 strategic plan. Other plans derived from this strategic plan include a BHB Digital Health Strategy, a BHB Enterprise Risk Management Plan, a BHB People Plan, a Quality Improvement and Patient Safety Plan, etc.

BHB also was awarded the Certificate of Distinction for primary stroke care and successfully implemented an organization-wide electronic medical record (EMR).

The organization has recently launched a new quality improvement initiative they named "Wards of Excellence". This has been rolled out to certain units including the Acute Care Wing, as well as Long Term Care. The objective of this is to encourage creativity and initiative for quality improvement at the unit level.

BHB continues to face challenges in patient flow, causing overcrowding at the Emergency Department. The organization is encouraged to intensively pursue coordination efforts, especially with partner organizations to identify strategies to offer patients therapeutic settings and intensities appropriate for their needs.

In addition, BHB is encouraged to review its bed management and administration, as well as resource allocation to ensure optimal use of all its beds as well as brick-and-mortar resources such as operating rooms, and buildings.

In order to optimize the use of limited resources, BHB is encouraged to define, in collaboration with other stakeholders, its role and responsibilities and limitations to the scope of service it provides so that it can focus on a well-circumscribed range of services, thereby decreasing the possibility of patients “orphaned” without services.

To maximize the investment and minimize the waste of material resources, a more rigorous inventory control process is recommended in order to reduce over-stocking of materials, leading to waste due to expiration.









Health human resources, recruitment and retention remain a significant challenge for BHB. The organization is encouraged to pursue the deployment of its People Plan in order to ensure it has the resources and expertise required to serve the needs of the population.

Overview: Quality dimensions results

Accreditation Canada uses eight dimensions that all play a part in providing safe, high quality health care.

These dimensions are the basis for the standards, and each criteria in the standards is tied to one of the quality dimensions.

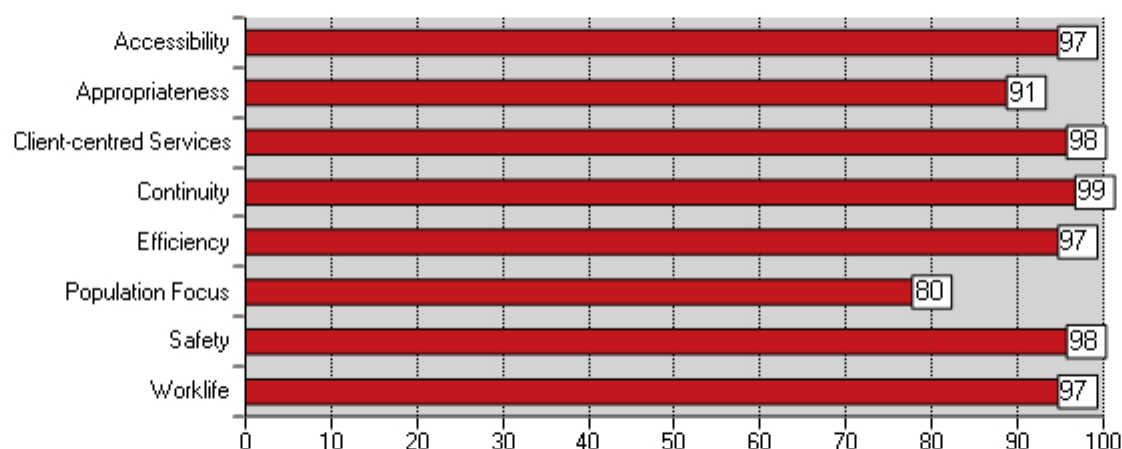
The quality dimensions are:

	Accessibility:	Give me timely and equitable services
	Appropriateness:	Do the right thing to achieve the best results
	Client-centred Services:	Partner with me and my family in our care
	Continuity:	Coordinate my care across the continuum
	Efficiency:	Make the best use of resources
	Population Focus:	Work with my community to anticipate and meet our needs
	Safety:	Keep me safe
	Worklife:	Take care of those who take care of me

Taken together, the dimensions create a picture of what a high quality health care program or service “looks like.” It is easy to access, focused on the client or patient, safe, efficient, effective, coordinated, reflective of community needs, and supportive of wellness and worklife balance.

This chart shows the percentage of criteria that the organization met for each quality dimension.

Quality Dimensions: Percentage of criteria met



Overview: Standards results

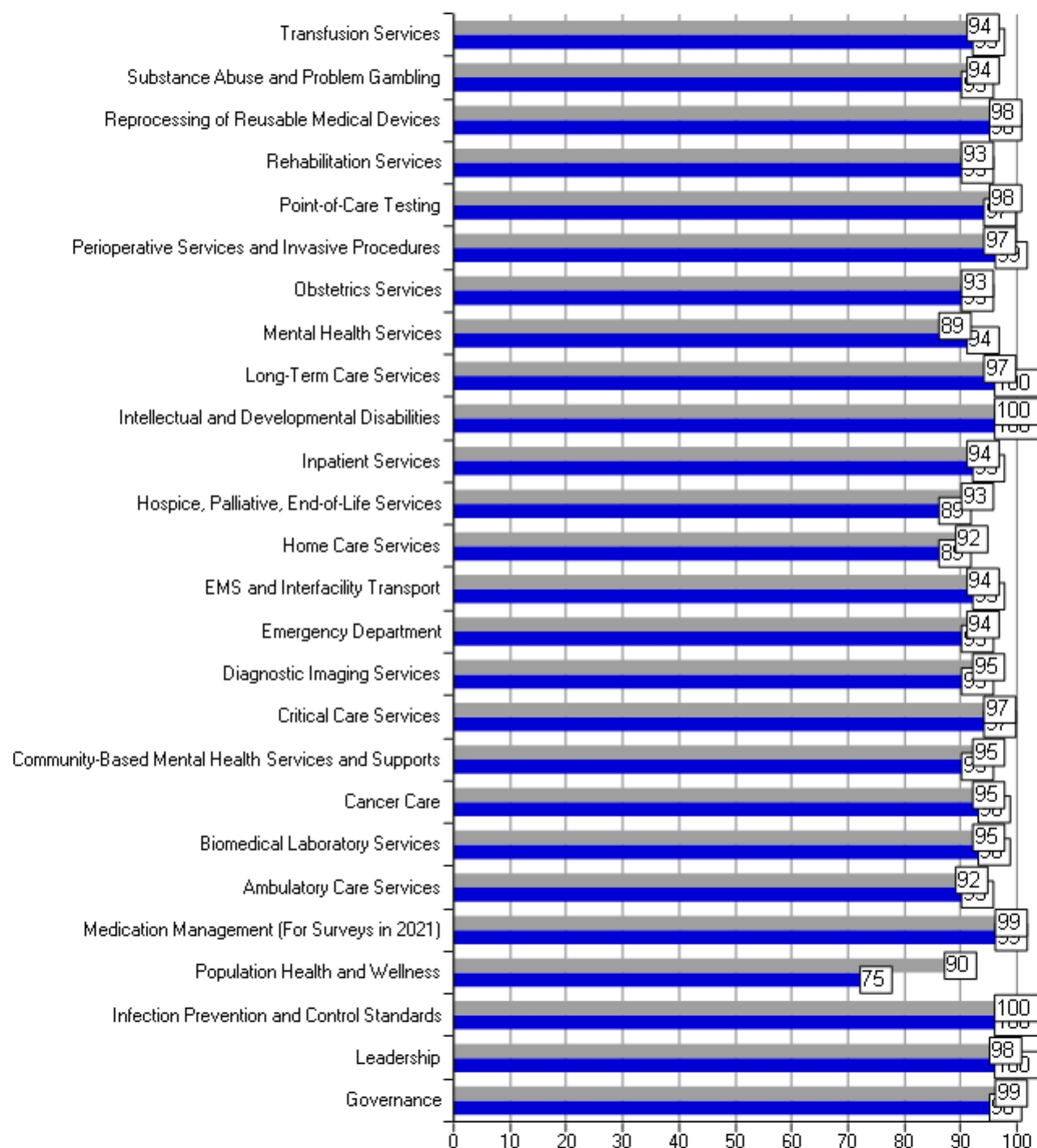
All of the standards make a difference to health care quality and safety. A set of standards includes criteria and guidelines that show what is necessary to provide high quality care and service.

Some criteria—specifically those related to safety, ethics, risk management, or quality improvement—are considered high priority and carry more weight in determining the accreditation decision.

This chart shows the percentage of high priority criteria and the percentage of all criteria that the organization met in each set of standards.

Standards: Percentage of criteria met

High priority criteria met Total criteria met



Overview: Required Organizational Practices results

Accreditation Canada defines a Required Organizational Practice (ROP) as an essential practice that must be in place for client safety and to minimize risk. ROPs are part of the standards. Each one has detailed tests for compliance that the organization must meet if it is to meet the ROP.

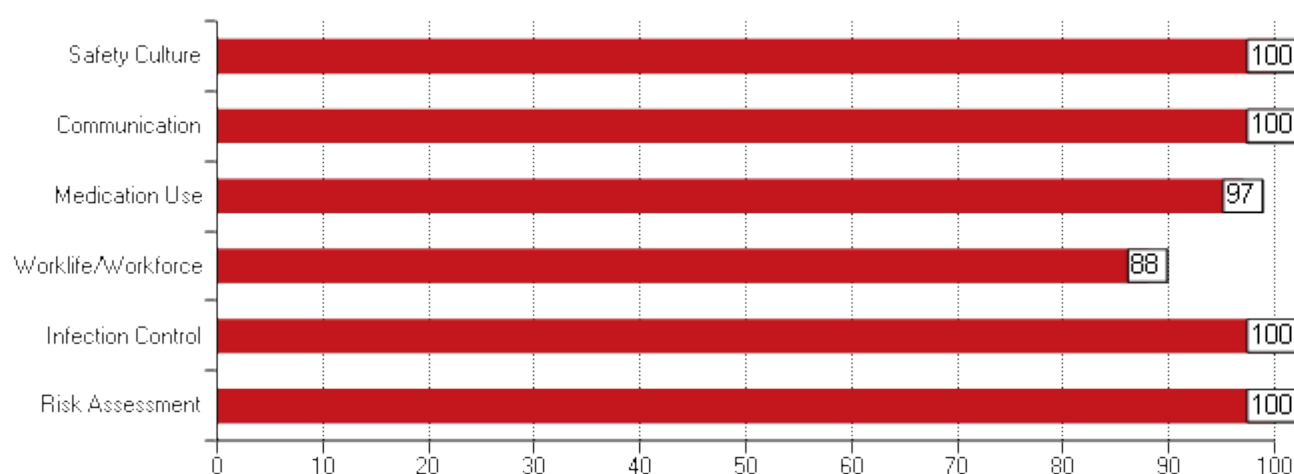
ROPs are always high priority and it is difficult to achieve accreditation without meeting most of the applicable ROPs. To highlight the importance of the ROPs and their role in promoting quality and safety, Accreditation Canada produces the Canadian Health Accreditation Report each year. It analyzes how select ROPs are being met across the country.

ROPS are categorized into six safety areas, each with its own goal:

- **Safety culture:** Create a culture of safety within the organization
- **Communication:** Improve the effectiveness and coordination of communication among care and service providers and with the recipients of care and service across the continuum
- **Medication use:** Ensure the safe use of high-risk medications
- **Worklife/workforce:** Create a worklife and physical environment that supports the safe delivery of care and service
- **Infection control:** Reduce the risk of health care-associated infections and their impact across the continuum of care/service
- **Risk assessment:** Identify safety risks inherent in the client population

See **Appendix B** for a list of the ROPs in each goal area.

ROP Goal Areas: Percentage of tests for compliance met



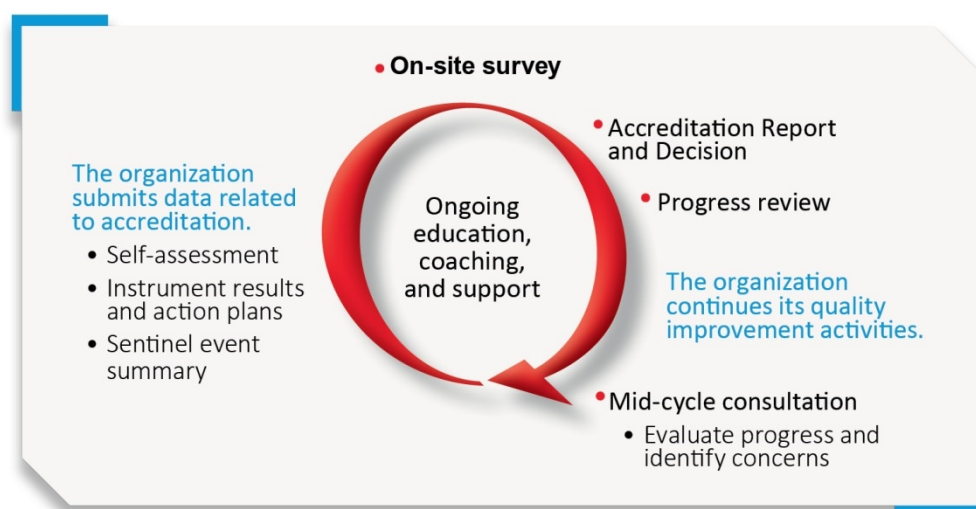
The quality improvement journey

The Qmentum accreditation program is a four-year cycle of assessment and improvement, where organizations work to meet the standards and raise the quality of their services. Qmentum helps them assess all aspects of their operations, from board and leadership, to care and services, to infrastructure.

The program identifies and rewards quality and innovation. The time and resources an organization invests in accreditation pay off in terms of better care, safer clients, and stronger teamwork. Accreditation also helps organizations be more efficient and gives them structured methods to report on their activities and what they are doing to improve quality.

In the end, all Canadians benefit from safer and higher quality health services as a result of the commitment that so many organizations across the country have made to the accreditation process.

Qmentum: A four-year cycle of quality improvement



As **Bermuda Hospitals Board** continues its quality improvement journey, it will conduct an in-depth review of the accreditation results and findings. Then a new cycle of improvement will begin as it incorporates any outstanding issues into its overall quality improvement plan, further strengthening its efforts to build a robust and widespread culture of quality and safety within its walls.

Appendix A: Locations surveyed

- 1 King Edward VII Memorial Hospital
- 2 Lamb Foggo Urgent Care Centre
- 3 Mid-Atlantic Wellness Institute

Appendix B Required Organizational Practices

Safety Culture

- Accountability for Quality
- Patient safety incident disclosure
- Patient safety incident management
- Patient safety quarterly reports

Communication

- Client Identification
- Information transfer at care transitions
- Medication reconciliation as a strategic priority
- Medication reconciliation at care transitions
- Safe Surgery Checklist
- The “Do Not Use” list of abbreviations

Medication Use

- Antimicrobial Stewardship
- Concentrated Electrolytes
- Heparin Safety
- High-Alert Medications
- Infusion Pumps Training
- Narcotics Safety

Worklife/Workforce

- Client Flow
- Patient safety plan
- Patient safety: education and training
- Preventive Maintenance Program
- Workplace Violence Prevention

Infection Control

- Hand-Hygiene Compliance
- Hand-Hygiene Education and Training
- Infection Rates
- Reprocessing

Risk Assessment

- Falls Prevention Strategy
- Home Safety Risk Assessment
- Pressure Ulcer Prevention
- Skin and Wound Care
- Suicide Prevention
- Venous Thromboembolism Prophylaxis