

**Board of Directors Accreditation Standards Cheat Sheet**

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| **Number** | **Standard**  | **Evidence**  |
| 1.1.1 | The roles, responsibilities, and legal obligations of the governing body are defined and regularly reviewed. | * Board policy manual is reviewed annually which outlines the Board’s roles and responsibilities
* Northwood/Shoreham Management Contract
* Role descriptions exist for Board Chair and Members
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| 1.1.2 | There are established mechanisms in place for the governing body to hear from and incorporate the voice and opinion of residents, families and/or caregivers. | * Resident and Family Survey Results
* Board member is a resident
* Board members attend Family Council on a regular basis
* Resident Council presentation to Board twice a year
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| 1.1.3 | The governing body has processes in place to oversee the functions of audit and finance, quality and safety, and talent management. | * Recruitment and retention of staff is a regular item in the CEO Report
* CEO selection, performance appraisal as outlined in the Northwood/Shoreham Management Contract
* Northwood/Shoreham management contract indicators
* Budget approval process
* Finance audit
* Quality and Risk are standing agenda items
* Corporate Scorecard
* Board policies
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| 1.1.4 | The governing body provides oversight of the organization's efforts to build meaningful partnerships with residents, families and/or caregivers. | * Corporate Scorecard
* CEO Report/Risk report
* More emergent through email and special meetings
* Board members attending Family Council
* Resident Council presentation to Board twice a year
* Board member is a resident
* Designated Caregiver (DCG) Program est. during Covid
* Board members volunteer at Shoreham
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| 1.1.5 | The governing body monitors and evaluates the organization's initiatives to build and maintain a culture of people-centred care. | * Corporate Scorecard
* Refer to Board Planning Cycle document (ongoing education/awareness/project updates)
* CEO Report
* Shoreham’s Quality Improvement Plan
* Strategic planning process/ priority setting based on resident, family, sector, community feedback
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| 1.1.6 | The governing body oversees the recruitment and selection of the executive leader of the organization. | * Refer to Northwood/Shoreham Management Contract
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| 1.1.7 | In partnership with the executive leader of the organization, the governing body sets performance objectives for the executive leader and reviews them annually. | * Refer to Northwood/Shoreham Management Contract (indicators)
* Corporate Scorecard
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| 1.1.8 | The governing body has a mechanism in place to receive updates or reports from the executive leader of the organization. | * CEO Report/Risk Report
* For emergent issues email is used
* Board meetings or special meetings as needed
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| 1.1.9 | The governing body approves the organization's capital and operating budgets. | * Board role/responsibility
* Finance specific meeting held annually
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| 1.1.10 | When approving resource allocation decisions, the governing body evaluates the impact of the decision on quality, safety, and resident experience. | * The Board uses Shoreham’s mission, vision, values and strategic priorities as a guide for decision making, all which speak to quality, safety
	+ improvements to main entry - quality of care
	+ vehicle for staff transport - addressing barriers to staff recruitment
	+ housing options for staff based on feedback from applicants/ additional data requested by Board to ensure liability issues addressed.
	+ 10 additional ceiling lifts - WCB/Staff safety/incident report data, vacancies/ workload
	+ scorecard data to make a resource allocation decision: eMAR system investment to reduce medication errors
	+ Decision and process that was undertaken to attain a management contract.
	+ preparations and decisions regarding the new build- setting priorities, advocating based on emergency repairs, systems break down (waste), ventilation, feedback from residents and families re size of rooms/shared rooms.
	+ The Board hears about medical care issues through the CEO Report (example is our challenge in having access to primary care)
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| 1.1.11 | The governing body monitors organization-level measures of resident safety. | * Shoreham’s Resident Safety Plan
* Shoreham’s Quality Improvement Plan
* Corporate Scorecard
* Refer to Board Planning Cycle document (education related to Institute of Safe Medication Practices/Med Audits, Wound care, Risk, Responsive Behaviours, Is Health and Safety On your agenda? Health and Safety for Board membersAWARE-NS Training, Scorecard. Planned sessions: the Role of the Nurse Practitioner in Long Term Care (repeat for new Board members), Electronic Medical Record (PCC)
* Resident and Family Survey Results
* CEO Report/Risk Report provides updates on projects and initiatives tied to resident safety
	+ Recruitment and retention
	+ IPAC/Covid 19/outbreaks
	+ Building renewal
	+ Ceiling lifts
	+ Licensing requirements/action plans
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| 1.1.12 | The governing body regularly hears about quality and safety incidents from the residents, families and/or caregivers that experience them. | * Resident is a Board member
* Scorecard incident data
* CEO Report/Risk Report
* Board members attend Family Council
* Resident Council presentation to Board twice a year
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| **1.1.13.1** | **The governing body is knowledgeable about quality and safety principles, by recruiting members with this knowledge or providing access to education.** | * Experience with Quality and Risk is part of the Board Composition Profile (**see Board Profile and Skillset Competency Form**)
* Board Education Sessions focus on Quality and Safety related issues. Examples include: Occupational Health and Safety, Institute of Safe Medication Practices/Med Audits, Staff survey results, Wound care, Risk, Responsive Behaviours, Is Health and Safety On your agenda? Health and Safety for Board membersAWARE-NS Training. Planned sessions: the Role of the Nurse Practitioner in Long Term Care (repeat for new Board members), Electronic Medical Record (PCC) (see **minutes Shoreham Village Senior Citizens Association - Meeting Minutes - May 15 2019, Shoreham Village Board of Directors - Meeting Minutes - November 17 2021, Shoreham Village Board of Directors - Meeting Minutes - May 17, 2023**)
* The Board actively recruits members who can provide first voice experience
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| **1.1.13.2** | **Quality is a standing agenda item at all regular meetings of the governing body.** | * Quality Improvement/CEO Report/Risk Report is a standing agenda item. The CEO report includes projects and initiatives related to quality and safety (see **Shoreham Village Board of Directors Meeting Agenda May 17 2023**).
* The scorecard is presented quarterly by the team followed by a Q&A session.
* The majority of Board Education sessions focus on quality and safety related issues as noted in test for compliance 1 (see **Board Planning Cycle 2022-24 document**)
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| **1.1.13.3** | **The key system-level indicators to be used for monitoring the quality performance of the organization are identified.** | * **Corporate Scorecard** review(quarterly) andminutes from the Board of Governors meetings include discussion/ questions related to the data being presented.
* **Annual Public Reporting on the website** <https://www.shorehamvillage.com/quality-and-performance/>
* Indicators associated with the evaluation of the performance of the Management contract between Northwood and Shoreham have been established, and regularly reviewed (see **Shoreham Village Board of Directors - Meeting Minutes - May 19 2021**, **Shoreham Village Board of Directors - Meeting Minutes - September 15 2021, Shoreham Village Board of Directors - Meeting Minutes - May 18 2022**). Evidence provided via the CEO report and a formal review completed Q2 years.
* Monthly CEO Report to the Board includes performance updates on the various initiatives connected to the Strategic Directions.
* **Monthly Risk Report that is embedded within the CEO report** (reports available to view onsite if needed - confidential content). Emergent issues are communicated to the Board via e-mail then follow up provided in the Risk Report.
* Targets and benchmarks are defined based on external data when available (e.g. Department of Health targets), or internal data where appropriate.
* Shoreham is now Canadian Institute for Health Information (CIHI) compliant so we have additional benchmarking
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| **1.1.13.4** | **At least quarterly, the quality performance of the organization is monitored and evaluated against agreed-upon goals and objectives.** |
| **1.1.13.5** | **Information about the quality performance of the organization is used to make resource allocation decisions and set priorities and expectations.** | * Resources allocated for Electronic Medication Administration Record (eMAR) due to high medication errors. eMAR was implemented in Nov 2020, improvements noted in med errors the following year (see **Shoreham Village Board Meeting - Minutes - November 20 2019, Shoreham Village Board of Directors - Meeting Minutes - November 25 2020, Shoreham Village Board of Directors - Meeting Minutes - March 24 2021, Shoreham Village Board of Directors - Meeting Minutes - September 15 2021**)
* The purchase of 10 additional ceiling lifts due to concerns related to WCB, staff safety, and incident report data, and the number of staff vacancies creating additional workload (see **Shoreham Village Board of Directors - Meeting Minutes - November 23 2022**)
* The purchase of a staff vehicle to improve recruitment and retention of staff (see **Shoreham Village Board of Directors - Meeting Minutes - January 18 2023**)
* In 2014, the Board of Directors identified issues with respect to sustainability. The organization was struggling financially, high WCB rates and the facility itself had numerous infrastructure issues with ongoing critical events. An RFP was issued. Northwood was selected as the successful proponent. In 2015, the first Management Agreement with Northwood was established. Legal Counsel for both parties guided both organizations in the negotiations. The Agreement was reviewed and updated in June/July 2022.
* Preparations and decisions regarding the new building - indicators that were used to advocate for the new building included emergency repairs, system break downs (waste), ventilation, and feedback from residents and families re size of rooms/shared rooms (see **2021-05-07 - SBAR Revised Plan for Shoreham Village Renovation**)
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| **1.1.13.6** | **As part of their performance evaluation, leaders who report directly to the governing body (e.g., the CEO, Executive Director, Chief of Staff) are held accountable for the quality performance of the organization.** | * CEO Report to the Board
* Corporate Scorecard (quarterly)
* Management Contract between Northwood and Shoreham with regular review of evaluation criteria/ indicators in place to monitor success, as indicated above under tests for compliance 3 and 4. Most indicators are reported on quarterly or annually, but a full review is completed Q2 years.
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| 1.1.14 | The governing body publicly discloses information about its governance processes, decision making, and performance. | * Performance indicators are available on the Shoreham website (incident rates, hand hygiene rates, resident/family survey results <https://www.shorehamvillage.com/quality-and-performance/>)
* Hand hygiene and pressure injury data is reported to Seniors and Long Term Care
* Shoreham Board minutes are posted to the website
* AGM
* Annual Community Report
* Quarterly Newspaper
* Social Media
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\*Standards in bold print are those standards tied to the Board Required Organizational Practice (ROP): Accountability for Quality of Care.