Accreditation 2021

Revisions to the Accreditation Standards

Further details regarding the accreditation process can be found in the Accreditation Manual of Guidance which can be accessed through Salvationist.ca.

Changes will come into effect for all reviews as of January 1, 2021.

Accreditation Standard Revisions

Throughout this document 'X' is used to signify that a change applies to all applicable program chapters (4-16). Because some standards have been eliminated, the standard numbers have changed. The former numbering is included for clarity.

Standards Edited for Clarity

- These standards have had the wording changed for clarity in interpretation but there has been no change in requirements: 1.1.2, 1.5.1, 1.5.2, 1.8.1, 2.5.2, 2.7.2, 2.8.2, 4.3.1, 4.3.2

Chapter 1: Governance and Management

- **1.2.1:** Standard revised to clarify the expectation of a local mission statement different from the territorial mission statement
- **1.2.2:** Standard revised to include TSA core values
- **1.3.2: New standard** to separate the expectations of a strategic plan from the strategic planning process (formerly included in 1.3.1)
- **1.7.2:** Standard revised to include Operating Policy: Controlled Substances
- **1.7.3: New standard** to separate the local policies from the Operating Policies and added accommodate policy (formerly included in 1.7.2)
- **1.9.11:** Standard and procedure revised to align with Operating Policy: Delegation of Authority – Property Purchase, Construction Repairs, Leases, etc.
- **1.10.X: New section** to capture specific risk management practices

Chapter 2: Employee Relations

- **2.5.1:** Standard revised to include employee health and safety e-learning checklist
- **2.6.X:** Section revised to clarify expectations of the PEAC process and related documentations

Chapter 3: Facility

- **3.1.1:** Standard revised to include Territorial Occupational Health & Safety Procedure Manual, and added resolution of work refusal
- **3.1.3:** Standard revised to clarify expectations for health & safety committee for monthly facility checks and to employ evidence-informed recommendations to enhance safety within the facility
- **3.2.4:** Procedure enhanced to ensure that emergency and disaster plans are reviewed annually
- **3.3.1:** Standard and procedure revised to include universal precaution, infection control policy and procedure, and the Territorial Occupational Health and Safety Policy Statement is to be posted
- **3.3.4:** Standard revised to include vaping
- **3.3.6:** Standard and procedure revised to align with Fleet Management practices
- **3.3.7: New standard** to ensure that the use of program vehicles meets organizational standards and fleet management practices

Chapter 4: Spiritual and Religious Care

- **4.1.3, 4.4.3, and 4.6.2:** Standard and procedure revised to emphasize connections with local Indigenous communities and accommodation of Indigenous ceremonies and traditions
- **4.2.3:** Standard enhanced to guide the development of SRC policies and procedures
- **4.3.3: New standard** to ensure that chaplains and SRC providers are engaging in continuing education to meet the needs of the program
- **4.4.2: New standard** to separate the expectations of the program space from the services offered and added availability of space for spiritual and religious rituals and practices (formerly 4.4.1)

Program Chapters Generally (4-16)

- **Standards eliminated:** X.9.5
- **10.1.1:** Standard enhanced to include quality indicators
- **X.1.4:** Reference to CMS eliminated in procedure c) of the standard. Other applications listed where applicable (e.g. Link2feed in Chapter 7)

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- **X.2.3:** Standard enhanced to specify person(s) responsible and timeframe for completion under process for assessment, and to include accommodation for service animals/emotional support animal
- **7.2.3:** Standard enhanced to include food recall
- **X.2.4:** (excluding Chapter 5 and 7) Procedure enhanced with the elimination of standard X.9.5
- **X.3.1:** Standard and procedure enhanced to include qualification off positions shall adhere to funder/licensing requirements, where applicable
- **X.3.4: New standard** to ensure ongoing development and training of program staff
- **5.5.3 and 7.5.3: New standard** to make certain that monetary transaction is separated between intake and program delivery in keeping with all other program chapters
- **X.5.4 (formerly X.5.3):** Standard enhanced to include accommodation request process
- **X.7.1:** Standard enhanced to include individual safety plan and a focus on client strengths and abilities in case management. Procedure enhanced to include staff and client interviews to ensure that client's participation and treatment choices are respected
- **7.9.2 and 7.9.3: New standard** added to enhance the improving programs and practices section for CFS programs in keeping with other program chapters
- **X.9.3:** Standard revised to indicate updated location of the Privacy Manual
- **X.10.2/X.11.2:** Standard and procedure enhanced to be consistent with other program chapters
- **X.10.3/X.11.3:** Standard enhanced to ensure that action plans for quality improvement are updated annually
- **X.10.4/X.11.4:** Standard and procedure enhanced to ensure that relevant stakeholders are involved in the follow through of action plans for continuous quality improvement
- **10.10.6 and 14.9.6:** Standard and procedure enhanced to include hand hygiene, reporting specifics, and interview with staff to confirm practice.

Residential Program Chapters (6, 8, 9, 10, 11, 12, 14, 15, 16)

- **15.1.6 and 16.1.6:** Standard enhanced to include harm reduction agencies
- **6.2.3, 15.2.3 and 16.2.3**: Standard enhanced to include policy outlining client access to harm reduction products
- **X.4.3:** Standard enhanced to include supports to maintain and improve health and wellbeing
- **X.4.5:** (excluding Chapter 10 and 14) Standard and procedure enhance to ensure safe and secure storage of client medication

- Accreditation criteria for Corp based ministry unit has been revised. Corps based ministry units that operate a financial management/trusteeship program will no longer be required to participate in the accreditation review process. Internal Audit will provide specific financial oversight of those programs moving forward.
- Virtual reviews to be piloted in Fall 2020. The virtual accreditation review comprises of two main differences. The first, a pre-site online document submission process in MS Teams, and the second, a shortened on-site review. All other review related processes and timeline will remain the same as the existing accreditation review process.
- Social Services Survey is an alternative to the accreditation review, with standards adapted to meet the operational realities of a smaller ministry unit. The Social Services Survey is to be piloted in 2021 for those eligible ministry units.
- With system level changes underway, notation of pathways for TSA policies are updated to reflect these changes accordingly. (e.g. Territorial Manual of Operating Policies are found on SaDashboard instead of Lotus Notes)