

Tiers of Service Self-Assessment after a Major Module Update (Existing Module)

After the development of a new module or after a major update of an existing module, a standardized self-assessment process is utilized with the following objectives:

- 1. New modules:
 - a. Identify the tier to which a particular service most closely aligns.
 - b. Identify areas of strengths and opportunities for improvement.
- 2. After a major update¹ of an existing module (this document):
 - a. Confirm or adjust the tier to which a particular service most closely aligns.
 - b. Assess progress on opportunities for improvement identified during the previous selfassessment.
 - c. Identify new areas of strengths and opportunities for improvement.

The description that follows is the standard process that is utilized for updating the self-assessment **after a major module update.** It is intended as a **guideline only** and is modified as appropriate for individual modules.

- 1. Agreement to update the self-assessment is provided by:
 - Child Health BC Steering Committee; and
 - Relevant Provincial Committee(s) (if exists).
- 2. Key individuals and groups are identified to support the self-assessment update process:
 - Executive Sponsor(s):
 - Provides overall direction & support for the self-assessment process.
 - Project Team:
 - Leads the self-assessment update process.
 - Membership includes a Project Manager, Analyst & other representatives as relevant to the module.
 - Self-Assessment Advisory Group:
 - Provides advice throughout the self-assessment update process on the development of the self-assessment interview/survey process, analysis of the results and format of the reports. The Advisory Group will consult with those who will be participating in the self-assessment as they develop the self-assessment process and plans to communicate the results (e.g., health authorities, ministries, and Indigenous partners).
 - Membership includes the Project Manager, Analyst and at least 1-2 individuals who participated in the update of the module.

¹ Major module updates are done every five (5) years, or more often if necessitated by changes in multiple areas of practice.





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- 3. An interview/survey tool is developed in survey and database tool to assess the status of:
 - Tier-defining criteria; and
 - Notable criteria; and
 - Progress on opportunities for improvement identified during the previous self-assessment.
- 4. Interviews/surveys are conducted in-person and virtually. Relevant service specific data (where available) is provided (e.g., volume data).
 - Facility/organization reps (operational and clinical lead at a minimum) are identified to participate in the selfassessment update.
 - Interviewer asks the representatives questions relevant to the service at their facility/organization: i.e., tier defining criteria & progress on provincial (if applicable), health authority (if applicable) and site-level opportunities for improvement identified during the previous self-assessment).
 - At the end of the interview, the representatives are asked to select which overall tier they think their
 organization/facility most closely aligns. If different from the tier alignment identified in the previous selfassessment, rationale is discussed.
- 5. All of the responses are captured in survey and database tool. Responses are sent to each facility/organizational rep(s) to validate and are updated in survey and database tool as needed.
- 6. Self-assessment survey results are analyzed. Tier alignment is confirmed for each facility/organization. New areas of strengths and opportunities for improvement are identified at a facility/organization, HA and provincial level. Progress on opportunities for improvement identified during the previous self-assessment is reviewed.
- 7. Results of the self-assessment are communicated as follows:
 - **HA/regional reports:** Shared with HA/regional leadership. Summarize the results for the HA and individual facilities/organizations.
 - Facility/organization reports: Shared with facilities/organizations by the HA/regional leadership. Identifies the tier alignment and summarizes the results for an individual facility/organization in comparison to the average achievement for facilities/organizations within the HA/region/province within the same tier group.
 - **Provincial summary:** Shared with the Child Health BC Steering Committee and relevant Provincial Committee(s) (if exist). Data is provided at the HA level only.