

moreOB SHA Resources to Obstetrics Accreditation Standards: Sample Alignment Guide

This chart provides a sample alignment between select subsections of the *Accreditation Canada – Qmentum Program Standards for Obstetrics Services* and corresponding resources or procedures available within the Saskatchewan Health Authority (SHA). It is designed to support teams in identifying how provincial tools, standards, and practices can assist in meeting accreditation requirements. Use this sample as a guide to reflect on your site's readiness and make connections between local implementation and broader organizational support.

Additional resources and information are available on:

-SHA Intranet – [Maternal/Children's Health Resources – Clinical Resources](#)

-Moms & Kids Website – [Provider Resources](#)

Accreditation requirement	SHA Resource
1.2.7 Translation and interpretation services are available for clients and families as needed.	Departments & Programs on SHA Intranet – Translation Services https://www.saskhealthauthority.ca/intranet/departments-programs/quality-safety-and-information/patient-client-experience/translation-services
1.2.16 Clients and families are provided with information about how to file a complaint or report violations of their rights.	Departments & Programs on SHA Intranet – Client Concerns https://www.saskhealthauthority.ca/intranet/departments-programs/quality-safety-and-information/quality-safety/client-concerns
1.2.15 The rights of newborn babies are promoted and respected.	Clinical Standard Baby-Friendly Infant Feeding & Clinical Procedure Direct Care of the Health-term Infant
1.3.5 (ROP) The team participates in the organization's evidence-informed program to prevent falls and reduce injuries from falls.	Provincial Fall Prevention is underway for all patients including birthing people, newborns, and pediatrics.
1.3.8 The team follows the organization's medication reconciliation procedure to maintain an accurate list of medications during care transitions.	SHA Document Finder: Clinical Documentation & Communication Standard Medication Administration CS-CDCS-0037 and Clinical Documentation & Communication Standard Transfer of Patient Facility to Facility CS-CDCS-0064

Accreditation requirement	SHA Resource
1.3.9 Clients at risk for adverse outcomes are identified.	Falls Risk Assessment tools for all patients / PPH Risk Assessment Clinical Form Maternal Sepsis Order Set / In Progress Pediatric Early Warning System / Eat Sleep Console / MgSO ₄ in progress
1.3.13 The assessment includes processes to identify women at risk for intrapartum and postpartum bleeding, and how to evaluate and prevent these types of bleeding.	Provincial PPH Bundle – clinical documents to assess, interventions and management, and evaluation
1.4.9 Timely diagnosis and treatment or interventions are provided to manage the client's intrapartum and postpartum bleeding.	Provincial PPH Bundle
1.5.7 There is a policy and procedure for sponge and needle counts both before and after all vaginal births.	Sponge and Sharp Count during Vaginal Birth Clinical Procedure
1.6.1 There are policies and procedures for administering oxytocin and prostaglandin safely and appropriately.	Smart pump program and All-Ages Monograph / Clinical Standard Infusion Pump Safety / In Progress – Clinical Procedure Fetal Health Surveillance Local induction policies and procedures
1.6.2 Oxytocin is administered using an infusion pump to facilitate accurate dosing during induction and augmentation of labour.	Smart pump program and All-Ages Monograph
1.6.3 The fetal heart rate and uterine activity are monitored and documented during oxytocin and prostaglandin administration.	In Progress – Clinical Procedure Fetal Health Surveillance
1.7.3 Skin-to-skin contact is supported and monitored, and bedside care to the mother/baby dyad is provided on a one-to-one basis.	Standard of dyad care in local sites – reference to Clinical Standard Baby-Friendly Infant Feeding & Clinical Procedure Direct Care of the Health-term Infant
1.7.4 There is an infant feeding policy.	Clinical Standard Baby-Friendly Infant Feeding & Clinical Procedure Direct Care of the Health-term Infant
1.7.5 Mothers are provided with 24-hour rooming-in facilities or access to private, comfortable and quiet rooms for feeding.	Clinical Standard Baby-Friendly Infant Feeding & Clinical Procedure Direct Care of the Health-term Infant