

# **Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario**



3/12/2018

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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#### **Overview**

Victoria Manor is a 166 bed long term care home that offers a secured home area and a Behavioural Support Ontario Team. The Quality Improvement Plan and the Resident Safety Plan have been part of the Home's strategic and operating plans. Specific objectives in the home's 2016-2019 Strategic Plan have fallen under the following strategic categories of focus:

- Our Residents/Clients
- Our People/ Team members
- Our Community
- Strengthening Support Services

Our home is CARF Accredited.

We collaborate with community organizations to offer programming which keeps residents active and involved with their families, friends and community.

Our Family Council demonstrates a consistent and strong support to the home. The Resident's Council is well represented.

This plan has been refreshed from 2017 and has been reviewed with all employees, families and residents.

Key values are Respect, Passion, Teamwork, Responsibility and Growth.

Other priorities for the home focus on quality indicators as follows:

- 1. Reduce falls
- 2. Reduce worsening of pressure ulcers
- 3. Reduce use of restraints
- 4. Reduce ED visits
- 5. Antipsychotic reduction
- 6. Resident Satisfaction- Likelihood to Recommend

These 6 priority indicators share alignment with the organizations Strategic Plan, the homes Operational Plan, the Long Term Care Service Accountability Agreements and CARF Accreditation Standards.

The home has a full management partnership with Sienna Senior Living that will facilitate the quality management processes and provide benchmarking standards to work towards.

Key considerations which may impact our 2017 performance include continuing changes in the resident population and acuity specifically the growing number of residents with psychiatric histories who have aged which results in aggressive behaviours.

The addition of a new physician and Nurse Practitioner will serve to be a positive intervention in addressing the above issues.

## Describe your organization's greatest QI achievements from the past year

In 2017, our home was successful in exceeding home specific performance indicator targets in the areas of ED transfers, reduction in stage 2-4 pressure ulcers, reduction in falls and reduction in prescribing antipsychotic medications without a diagnosis.

ED transfers from 39.81 to 26.94

Stage 2-4 Pressure Ulcers from 4.82% to 4.34%

Falls from 24.69% to 22.9%

Anti-psychotic medications from 25.43% to 22.11%

Transfers to the emergency department an ongoing focus and analysis of the reasons for transfers was initiated. Services such as mobile x-ray service, home care services for IV therapy and the in-home support of the Nurse Practitioner, positively influenced the reduction of ED transfers from 39.81 % to 26.94%.

The home exceeded the 2017 benchmark of 22.11% (was 25.43%) established for the reduction in the percentage of residents taking antipsychotic medication without a diagnosis of psychosis. This reduction has resulted from an ongoing focus on appropriate use of antipsychotics. The behavioural support team helped staff recognize behaviours likely and unlikely to respond to antipsychotic medication, increasing the use of documentation such as the DOS (dementia observation scale), and bringing providers, staff, and families "on the same page".

In addition the monthly Resident Safety Meetings served to more closely monitor individual residents. Daily reviews of risk related issues to ensure timely response.

It is important to note all levels of the health team were included in these processes to support a collaborative approach.

#### **Resident, Patient, Client Engagement**

October of 2017 resulted in an overall resident satisfaction rate of 92% an improvement of 3% from 2016. Added to this is the family response rate of 85% satisfaction which demonstrates a culture of engagement and transparency.

The Family Council for Victoria Manor is a dynamic council who work closely with the leadership and resident council to support quality of life and resident-focused care. Their meetings are bi-monthly and have an attendance of some twenty (20) to thirty (30) people and the executive are fully engaged in home events.

One of the primary goals of every long term care community is to work collaboratively with residents and families to enhance resident experience. It is imperative that as part of the quality improvement process, the voice of residents and families are included. In our home, resident and family feedback is obtained through their move in and annual care conference as well as Resident Council/Family Council and annual satisfaction surveys. Their input is also sought in annual program evaluations and strategic planning. Areas of improvement are identified and positive ideas for change are brought forward and incorporated into the development of our operating plan and our annual Quality Improvement Plan. We feel that by incorporating resident and family feedback we are better positioned to drive quality improvement and create a positive resident experience.

#### **Collaboration and Integration**

Victoria Manor is working alongside many systems and community partners in the execution of these quality improvement initiatives. We continue to work with many partners including primary care teams, the Central East LHIN, Community Care Access Centre, Behaviour Support Ontario, local hospitals, suppliers including 3M for wound and skin care, Achieva for falls reduction. We continue to track, analyze and respond to CIHI data on a quarterly basis.

#### **Engagement of Clinicians, Leadership & Staff**

Engagement and contributions from all cohorts of the staff are achieved both formally and informally through processes including operational planning, departmental staff meetings, sharing committee minutes, general staff meetings. Resident and Family council presentations are held regularly with opportunities to contribute.

The culture of engagement, respect and contribution was 72%. This is evidenced by the 2017 employee engagement survey results. Team members participated in operational planning with the goal to define was to improve overall satisfaction in the areas of organizational climate including culture, outlook, leadership and communication.

#### **Population Health and Equity Considerations**

We work with a diverse array of clients at Victoria Manor. This rural centre serves not only the traditional seniors population but includes residents suffering with addictions, mental health diagnoses and homelessness. We partner with organizations such as the Centre for Addiction and Mental Health to ensure these residents receive the highest quality of care in addressing their unique needs. As well, we work with Public Guardian and Trustees in advocating for optimal care of these individuals.

Victoria Manor endeavours to establish ourselves as an integral part of our community in order to better serve our residents of different ethnic, religious and cultural backgrounds (e.g. French-Canadian, Italian, Jewish, Mennonite, etc.). Our menu caters to our population's diverse requests and preferences. We are fortunate to have team members available who speak different languages and we make every effort to identify and pair residents with the appropriate team member who will most benefit them to allow optimal communication of their daily needs as well as ensure that our residents are feeling at home and comfortable at Victoria Manor.

At Victoria Manor, we embrace a vision whereby we aim to "awaken our communities to the positive possibilities of life's next chapters" as seniors constitute the majority of the population that we serve. Many of our residents are dealing with physical deficits in addition to cognitive impairments including dementia.

We collaborate with Behavioural Supports Ontario and the Alzheimer's Society as well as Psychogeriatric Resource Consultants in addressing the unique needs of residents dealing with a mental health diagnosis. We partner with our LHIN's and local hospitals to ensure our residents receive the highest level of care as they transition across the continuum of care. This collaboration supports our quality improvement initiatives such as reducing avoidable Emergency Department transfers as well as worsened stage 2-4 pressure ulcers.

Our organization continues to embrace the principles of the Canadian Foundation for Healthcare Improvement Antipsychotic Reduction Project as part of our continued efforts to ensure appropriate use of antipsychotic medications.

We actively collaborate with the local Public Health Unit in managing outbreaks as part of our infection control and prevention activities.

We have also partnered with Sienna Senior Living to provide volunteer opportunities within the home. We recently launched our "Sienna for Seniors" program which is a partnership with United Way, that will be dedicated to fundraising for seniors in need within our own community.

We continue to partner with Registered Nurses Association of Ontario to ensure that we are always providing care reflective of Best Practices in the province.

## Access to the Right Level of Care - Addressing ALC

At Victoria Manor we have established a great working relationship with the local CCAC that ensures minimal vacancy of our beds, which means we have provided a home to yet another person in need. Members of our Management team review the CCAC profiles of potential residents for suitability for our care community. We are fortunate to have an in-house Nurse Practitioner who collaborates with our Physician on a daily basis which affords us the ability to allow our residents to remain at Victoria Manor rather than endure unnecessary stays in hospital. We have the ability to offer such in-house services as IV therapy, home care services and mobile diagnostics.

Victoria Manor provides respite options to people in the community who require these services.

#### **Opioid Prescribing for the Treatment of Pain and Opioid Use Disorder**

When a resident moves into Victoria Manor, pain is assessed using a pain scale to establish a baseline. We continue to monitor pain regularly. If signs and symptoms of pain are present, our interdisciplinary team members which include the physician, nurse practitioner, physiotherapist, occupational therapist, dietitian and behavioural support nurse work together to reduce or resolve the resident's pain. Our goal is to work as a team with the resident and/or family to using the least invasive treatments but rather embrace alternate treatments including therapeutic modalities, and/or joint supports such as splints, braces, and other positioning aids. Education on pain management is provided to residents and family members to support the use of non-invasive treatments or medications.

Over the coming year, in collaboration with the Medical Director, attending physicians and Nurse Practitioner, the home will explore access to community services to support residents with addictions.

#### **Workplace Violence Prevention**

Victoria Manor promotes the values of respect, teamwork, and responsibility which are cornerstones to promoting staff safety and preventing workplace violence within our organization. In support of staff safety, the home offers an early safe return to work program for employees as well as education to staff around the hazards that may exist within the workplace and how to work safely. The Joint Health and Safety Committee is in place and policies and procedures exist around all of the above in addition to around workplace violence, harassment and bullying. These include policies and procedures to support staff in dealing with anger in the workplace as well as in recognizing domestic violence in the workplace and in completing a workplace violence risk assessment as well as in investigating a report of workplace violence, harassment and bullying. Emergency codes are in place to ensure that staff can communicate and act appropriately in the event of an emergency situation for the safety of all involved. These emergency codes include "code white" to alert staff to a violent situation within the home. The Quality of Work Life Committee is in place in addition to employee access to confidential counselling services offered through our benefits provider to promote the health and well-being of employees. Additionally, we actively collaborate with local Public Health Units to effectively manage outbreaks in our home as part of our infection control and prevention activities and ensure compliance with Ministry of Labour regulations.

## **Contact Information**

Pamela Kulas, Administrator pkulas@kawarthalakes.ca 705-324-3558 Other Victoria Manor Home for the Aged is owned by the City of Kawartha Lakes

# Sign-off

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan

Board Chair / Licensee or delegate _	(signature)
Administrator /Executive Director	(signature)
Quality Committee Chair or delegate	(signature)
Other leadership as appropriate	(signature)