

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 20, 2023

peopleCare
communities



OVERVIEW

Hilltop Manor Long Term Care is home to 185 residents in the heart of the Galt, a small community within the City of Cambridge, Ontario where we have been providing service for over 50 years. The home is licensed for 185 residents. We have a strong focus towards quality improvement that aligns with our organizations mission, vision, and values. We strive to embrace quality and to collaborate with our partners to ensure optimal services for our residents, families and our staff team. As evidence of our commitment to quality Hilltop Manor Long Term Care was awarded Accreditation with Exemplary Standing, through an Accreditation Survey conducted by Accreditation Canada in November 2019.

peopleCare has been awarded one of Canada's Best Managed Companies since 2013, and are currently accredited with Exemplary Standing through Accreditation Canada. Hilltop Manor Long Term Care has embraced their core values focused on people, professionalism, integrity, growth, and excellence, and we're thankful to their support and leadership and collaboration that this partnership offers us as a stand alone family owned home.

Through the past 3 years of the covid pandemic Hilltop Manor Long Term Care is so proud of their values-based decision making and the positive impact that this has had in their covid response for their residents, staff and families. Through this time we pivoted quickly as a leadership team supported by the peopleCare Communities team into incident command where our focus was safety and support to our residents staff and families. We are grateful to be able to now support a shift back to our Quality Improvement agenda in developing plans to support enhanced experience and quality of life for our residents, and families, and

Recovering Strong for our staff. This is the primary focus of our Quality Improvement Action plan for this year, along with our goal of shifting our culture, and philosophy of Care by adopting a palliative Care philosophy for all Care and services.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Hilltop Manor Long Term Care, along with all others in the health sector and the province have been leading through an emergency of the worldwide Covid Pandemic. This required great flexibility and a commitment to ethical decision making to support the safety of our residents, staff and families through the ever-changing environment.

Our home teams were focused and committed to supporting our residents, their families and each other through the past 3 years and we are extremely proud of them, and the home's response to the pandemic.

As a Medication Safety Champion home, we continued to work on our ISMP objectives of improving medication awareness and engagement among residents and their families. Additionally, we were able to provide support and education to other long term care homes who were adopting this as a priority.

We look forward of getting back to purpose and meaningful connections with our residents, and families as we shift out of the pandemic and optimize the support of peopleCare communities for their leadership in our corporate palliative care QIP, as well as our Recovering Strong Strategy for our staff.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

We began the development of our Quality Plan with a thorough review of all of clinical data, IPAC data, as well as our Resident, Family and Staff Survey data from 2021, and 2022 with our newly developed Quality Committee, Resident, and Family Councils, and our staff team including Health, Safety and Wellness Committee. Through this review, as well guided by our organizations Balanced Score Card, and the new Resident Rights through the updated Act and Regulations we were able to determine the KPI's we will be monitoring to develop quality improvement plans to improve over the next year. We have examined the key priority indicators from Ontario Health and continue to review and benchmark our indicators with homes in our organization and across the province.

For every program (including responsive behaviors, infection control, falls prevention, pain/palliative, skin and wound and continence) an interdisciplinary team contributes to the quality improvement strategies, through information-sharing and considering change ideas. Through various forums (newsletters, QIP bulletin boards, resident/family council minutes, appreciation events) we celebrate positive outcomes throughout the year.

Our team does continue to work with our many valued service providers for clinical services and our community partners such as the Waterloo Wellington LHIN, Ontario Health, local hospital, External BSO, CMHA, Alzheimers Society and the RNAO.

PROVIDER EXPERIENCE

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peopleCare has developed a Recovering Strong strategy to support staff in achieving their wellness goals. One strategy that came from the original survey of staff was to support mental wellness. We partnered with CMHA and developed education sessions for staff which were met with great success. Our follow up survey which had a 91% participation rate at Hilltop Manor has resulted in additional mental health sessions being offered for staff, additional appreciation and recognition events like our Value Awards and the adoption of our Walk for Wellness as a signature event.

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WORKPLACE VIOLENCE PREVENTION

peopleCare is committed to keeping team members safe. As part of

our Health, Safety and Wellness program, Hilltop Manor tracks near misses and incidents of staff injury involving residents. Follow-ups are done, often including the Behavioral Supports team, to provide strategies for resident care that will reduce the likelihood of further incidents occurring. Our Behaviour Support Ontario (BSO) team provides resources and guidance to team members on how to understand residents' personal behavioural expressions and help to identify individualized support and interventions. This can help to prevent personal expressions that may result in injuries of team members or workplace violence.

Team members receive on-going education and in-services throughout the year on preventing injuries through learned approaches and strategies such as re-directing residents, gaining resident consent and participation with bathing, eating and dressing. Community Partnerships with LHIN funded Psychiatric geriatric Resource Consultants (PGRC) has been valuable in supporting Physicians and Registered Team Members looking at medication management in de-escalating verbal and physical expressions.

All accidents, incidents and near misses are reported, recorded and shared with our Joint Health and Safety Committee. Senior leadership and the JHSC Co-Chairs complete an annual workplace violence and risk hazard assessment for the home. Results are to identify any actions needed to reduce potential risk factors.

Our Workplace Violence and Harassment policy has been updated. Team members complete training annually on workplace violence and harassment as well as whistle blowing. We also have educational materials available for our team members to help them

identify additional resources and organizations in the local community for support. In addition, our employee assistance program offers a variety of counseling services and supports for our team members and their immediate family members.

PATIENT SAFETY

Resident safety is our highest priority. We have several ways in which we track and report incidents revolving around resident safety, including critical incident reporting with the Ministry of Long Term Care, internal incident reporting through Point Click Care, complaints tracking and follow up action planning, whistle-blowing protection, and ways on how to report a concern is posted throughout the home.

We utilize the funding provided by the Ministry for Falls Prevention by purchasing devices that will assist our team members to support our residents and mitigate harm should they fall (i.e. bed/chair alarms, hip protectors, head gear).

Our Medication Safety Technology provides accountability with tracking and administering medications including narcotics. Internally, we track medication errors, infection rates, restraints used, resident falls, resident pressure ulcers, etc. in workbooks. We also receive quarterly statistics on quality indicators and how they compare to Ontario standards. We are also an ISMP champion home and our goal is to improve resident & family understanding of medication management.

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Ontario standards. Our goal is always to be at or below provincial standards. Our Quality Improvement Team and program committees review these statistics and best practices which allow us to look for trends and subsequently develop action plans to put interventions in place. These interventions are communicated at committee meetings, Resident Council and Family Council and added to the resident's care plan where applicable.

HEALTH EQUITY

Our home collects sociodemographic data on our team members in our payroll system. The resident information is gathered in our Recreation Assessment and in point click care upon moving in and onward on a quarterly basis. We try our best to match up team members and residents who speak a common language or practice a common religion to promote unity and offer our residents the ability to better communicate when such language barriers are present. Upon moving in, we develop a plan of care around the resident's preferences related to their cultural beliefs, diet preferences, and daily activities of living. We develop information about the resident through our "All About Me" program that highlights the important aspects of our residents' lives so our team can better engage with our residents. At our resident care conferences, we focus our discussion on resident preferences and choice and what is important to them and how it aligns with their way of living.

In 2023 we will endeavour to focus on Diversity and Inclusion as part of our Recovering Strong strategy for employees in partnership with our unions that will celebrate diversity in our home throughout the year.

CONTACT INFORMATION/DESIGNATED LEAD

Cathy Donahue
Executive Director

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 on **March 24, 2023**

Jennifer Killing, Board Chair / Licensee or delegate

Cathy Donahue, Administrator /Executive Director

Cathy Donahue, Quality Committee Chair or delegate

Other leadership as appropriate
