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

April 20, 2023



#### **OVERVIEW**

Meaford Long Term Care is a part of peopleCare Communities. Our newly redeveloped 128 bed long term home is located on beautiful Georgian Bay in Meaford, Ontario. As we prepared for the 2023/2024 QIP submission, we reviewed our performance on key priority indicators, the strategic plan of the organization and the Operational plan of the home. These align with the Accreditation Standards and Ministry of Health. In 2023 we are striving for a repeat 4 year accreditation award with exemplary standings. peopleCare Communities strive to exceed the Ministry of Health standards, and Accreditation Canada Standards. Through the past 3 years of the covid pandemic Meaford Long Term Care is 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 QOL 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.

Meaford Long Term Care is welcoming 30 Internationally Educated Nurses to our home in 2023. These talented team members will be working as personal support workers in the home, and some will be obtaining their full nursing licenses. As a community we are so happy to have our new teams members join not only the home itself but our local community as a whole!

Meaford Long Term Care is proud to conduct our annual Staff Wellness Survey to hear about our team's overall well-being. We have partnered with the Canadian Mental Health Association to provide information and support to our staff through targeted initiatives based on our Wellness Survey results. We also offer our staff access to the confidential Employee Assistance Program in an effort to support our team both in the workplace and outside of the workplace if they require it.

DATA REVIEW PROCESS: 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 2022, and Q12023 with our 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 and developing quality improvement plans to

improve over the next 18 months. 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.

PRIORITY AREAS FOR QUALITY IMPROVEMENT: In order to support forward movement towards our goals set in our QIP, as well as support our recovery post pandemic we have made a decision to focus on the key areas of resident QOL and satisfaction for this years QIP. In order to develop the change ideas and initiatives we engaged our front line team, and partners to support setting achievable targets for our QIPs and to meet and exceed our goals for increased resident satisfaction. Our action plan includes our commitment to supporting our front line through our Recovering Strong initiative, a corporate QIP commitment towards palliative care approach for all care and services and working with our resident and families to improve QOL in the home through initiatives they have requested through their feedback in the QOL survey conducted annually.

PROCESS TO MONITOR & MEASURE PROGRESS: Meaford Long Term Care has an established circle of communication to support the monthly and quarterly review of outcomes through data analysis at leadership team meetings, departmental meetings, resident and family councils, our professional advisory committee and of course our quarterly quality meetings. Data is collected and reviewed on a routine basis to evaluate success towards our determined SMART goals in our action plan, and actions adjusted if needed to ensure we are working toward improvement of our selected outcomes over time. We do complete an annual report as a home as well with sharing to our resident, family, staff and quality committee for full review of our successes and outcomes as a home. We have at our disposal a data analytic platform within our EHR (PCC) to support benchmarking against provincial averages for clinical data determined from RAI-MDS.

These processes are well defined through the above committee's agenda's and meeting minutes. We are extremely proud of how we as an organization supported the ongoing connection between residents and their family caregivers throughout the pandemic, but look to the new additions to our residents rights around palliative philosophy or approach to care and services to shape a

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commitment to shift culture in our home, and with the other homes in the peopleCare communities organization through the next year.

## **REFLECTIONS SINCE YOUR LAST QIP SUBMISSION**

Meaford Long Term Care, along with all others in the health sector and the province have been leading through an emergency of the worldwide Covid-19 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.

We look forward of getting back to purpose and meaningful connections with our residents, and families as we shift out of the pandemic and optimizing 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

As an interdisciplinary team we look forward to continuing partnership with our Resident and Family Council to support our Quality Improvement Objectives. We also look to continue our relationship with Ontario Health and our dedicated service providers, and community partners to support us in our goals and objectives.

#### **PROVIDER EXPERIENCE**

Meaford Long Term Care has been providing service in Meaford for over 40 years, and through that time we have developed strong partnerships within our local, regional and provincial community and will continue to expand our partnerships.

## WORKPLACE VIOLENCE PREVENTION

peopleCare is committed to keeping team members safe. As part of our Health, Safety and Wellness program, Meaford Long Term Care 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 team (BRT) has been valuable in supporting Physicians and Registered Team Members looking at medication management in de-escalating verbal and physical responsiveness. 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 5

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**

In 2023/2024 Meaford Long Term Care is looking forward to focusing on resident safety. We will utilize the scores and data from our Resident, and Family QOL survey tool to support us in the development of our QIP. This plan works towards enhancing our residents experience and

QOL and overall safety within the home.

## **CONTACT INFORMATION/DESIGNATED LEAD**

Bethany Rupp- Executive Director brupp@peoplecare.ca Allison Lewis- Director of Care alewis@peoplecare.ca

## 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 30, 2023

Jenn Killing, Board Chair / Licensee or delegate

Bethany Rupp, Administrator / Executive Director

Salima Massani, Quality Committee Chair or delegate

Other leadership as appropriate