

Continuous Quality Improvement Initiative - Interim Report 2022-23

OMNI Health Care Burnbrae Gardens

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Overview

At OMNI Health Care Burnbrae Gardens we believe that each step taken in our quality journey is a step closer to providing our residents with the highest standard of excellent care. Overall, our Quality Improvement goals and objectives are intended to enable change so that improvements can be realized. Our QIP aligns with strategic and operational plans as we focus on change management; creativity in the development and implementation of unique resident programs and fostering a culture of making a difference at the front line.

Our Quality Improvement Program has a strong focus on safety, well-being and overall quality resident experience.

Setting Priorities

It is recommended that indicators where performance has been below organizational goals or provincial benchmarks be given the strongest consideration. High priority indicators must be closely aligned with organizational strategic priorities and will receive a greater emphasis in terms of change plans and resources for implementation than lower-priority indicators. When results have been sustained at rates that are consistent with organizational goals or performance is at or near theoretical best, a lower priority rating is to be considered.

Calculating Priorities

OMNI Health Care uses a tool called a Priority Calculator to determine which improvements will have the biggest impact on helping to realize its quality improvement goals. The priority calculator helps the Home decide where to focus time and effort on Quality Improvement. This tool enables OMNI to make strategic choices about which quality improvement activities the Home will plan to undertake.

The Priority Calculator lists a set of questions that are grouped into three categories:

- **Impact:** The questions in this section focus on identifying a quality problem that is common, whether it has consequences for residents, if it has an impact on related areas, if there is a gap between the current and desired state, the costs to the organization and if the problem constitutes a business case. (Scale of 1-8)
- **Ease of implementation:** The questions in this section focus on a quality problem for which there is already a good change package, measurement tools available or in use, the successes achieved by other LTC homes and the change ideas that are actionable by the LTC home staff. (Scale of 1-8)
- **Alignment:** The questions in this section ensure that the organization's efforts are focused on a quality problem that is aligned with the provincial priorities, accountability agreements, public reporting and organizational strategic plans. (Scale of 1-10)

The impact and ease of implementation questions are rated on a scale from 1 to 8, while the alignment questions are rated on a scale from 1 to 10.

Alignment questions are given more weight in order to ensure that LTC home leaders focus on quality topics that are aligned with provincial priorities and organizational strategic plans.

The Priority Calculator is reviewed and updated annually, at minimum and posted in the Home on the Quality Improvement Communication Board.

Monitoring and Measurement

OMNI Health Care monitors and measures progress on home specific, organization specific and provincial priorities. Quality Improvement meetings are scheduled monthly and expanded on a quarterly basis to include key stakeholders, including residents, families, and other interested parties. Clinical and non-clinical indicators are reviewed at each meeting and measured against established benchmarks, such as organizational and provincial averages or benchmarks, goals and aim statements. Meeting Minutes, Quality Indicator Reports and Topic Specific Plans are all posted in the Home on the Quality Improvement Communication Board.

Clinical Indicators

OMNI Health Care provides each Home with a comprehensive and comparative quarterly corporate report of clinical indicator data for all OMNI Homes based on the RAI-MDS data for that quarter. The following Clinical Indicators are monitored and measured:

- Symptoms of Delirium
- Use of Anti-Psychotics without a Diagnosis of Psychosis
- Falls
- Stage 2-4 Pressure Ulcer, New Stage 2-4 Pressure Ulcer, Worsened Stage 2-4 Pressure Ulcer
- Daily Physical Restraints
- Pain, Worsened Pain

Topic specific quality improvement plans are developed for any clinical indicator at or above the provincial average.

Non-Clinical Indicators

Each OMNI Home also reviews home-specific non-clinical indicators each quarter. The following Non-Clinical Indicators are monitored and measured:

- Number of ED Visits
- Resident and/or Family Complaints
- Legislative Compliance
- Staffing – 24/7 RN Coverage, Staffing Shortages, Agency Use
- Surge Learning
- Outbreak Status
- Critical Incidents

Resident Experience Surveys

Residents and/or Substitute Decision Makers are invited to participate in a Resident Experience Survey on an annual basis. This survey solicits feedback from residents with regard to the level

of satisfaction with the care and services provided and gives Residents and their families an opportunity to communicate suggestions for improvement to programs and services offered in the Home.

Survey results and the accompanying Commentary Report are reviewed with Resident and Family Councils and posted in the Home. Quality Improvement plans are developed for any satisfaction result of 80% or less, identified as a priority and evaluated by the QI team.

Priority Areas for Quality Improvement

OMNI Health Care Burnbrae Gardens has identified the following 3 areas as the top priorities for Quality Improvement:

Priority #1 – Resident and Family Engagement

Priority #2 – Recruitment and Retention

Priority #3 – Infection Prevention and Control

Continuous Quality Improvement Process

Quality Improvement is achieved through the Quality Matters Program at OMNI Health Care. Once priority areas for improvement are identified, Burnbrae Gardens undertakes the process for improvement in alignment with organizational policy and the Model for Quality Improvement, including use of the PDSA (Plan-Do-Study-Act) Cycle.

The following is a brief summary of the QI Plan for these priority areas. Complete plans and are available for review in the Home or by contacting the Quality Improvement Lead in the Home.

Priority #1 Family Engagement

Our goal is to increase Family Engagement in the Home by establishing an active Family Council.

At present, we have seen little interest in meeting attendance with a meeting in May, 2022 that had no attendees. We have scheduled a secondary meeting for August 31st, 2022 in hopes that we can start to build a family council again.

The plan for improvement includes better promotion and communication of this upcoming meeting in August. We plan to describe to our family members what a family council is and how it can enhance the lives of the residents. LEC will send out invites in the monthly billing in July to all family members and encourage them to join us. LEC will also attend the initial meeting to give further details and get the council members excited. We also offer a Zoom link for any family members who are not able to attend in person on the scheduled meeting date. Family Council information is reviewed with the POA during the initial resident admission process along with encouragement to join our quality improvement team. We also secondarily encourage family members to join our teams at the 6-week post-admission conference and yearly after that.

Burnbrae Gardens' goal is to have strong attendance at our quarterly family council meetings.

Priority #2 Recruitment and Retention

At present, Burnbrae Gardens is experiencing challenges in the recruitment of qualified registered staff along with recruiting qualified life enrichment aides. Burnbrae Gardens is currently utilizing one of Health Ontario recruitment programs SPEP (Supervised Practice Experience Preceptorship) we currently have one registered staff that will have completed this program by end of July 2022 and he has accepted a part-time registered nurse position. Burnbrae Gardens is currently partnered with numerous local colleges and support regular PSW, RPN and therapeutic recreation students during their placement. In 2022 we have successfully supported eight PSW student placements. We offered positions to all the students and four of these students accepted employment.

The plan for improvement includes the continuous promotion of Burnbrae Gardens employment opportunities utilizing many different platforms such as indeed, local community newspapers, OMNI way website, social media, and word of mouth. We also work closely with our community partners such as the hospital and other local retirement homes to promote networking between the nursing professions to enhance their skill sets in the different health care settings. Burnbrae Gardens also plans to attend job fairs throughout the year at local high schools, colleges and universities in hopes of recruiting.

Burnbrae Gardens' goal for recruitment is to expand our network by exploring new technologies and looking for other opportunities to enhance and recruit qualified employees. Burnbrae Gardens' goal for the retention of current employees is to have a stronger focus with a more detailed and comprehensive orientation program that will provide continued peer support and exceptional leadership to ensure continuous success and growth.

Priority #3 Infection Prevention and Control

At present, Burnbrae Gardens has a designated multi-disciplinary team and an Infection Prevention and Control Lead who is responsible for overseeing all measures related to the program as per the Ministry of Long Term Care requirements. She completes daily, weekly, bi-weekly, monthly and quarterly audits that include the observation and corrective action of infection control practices with our front-line staff. She dedicates time to the surveillance of infection rates within our resident population and determines the plan of action for improvement and communicates these interventions to all employees. The home completes monthly multi-disciplinary team IPAC meeting's to ensure all our practices are transparent and consistent with the required IPAC standards. These Infection control standards were recently inspected in June 2022 by the Ministry of Long Term Care and they found that Burnbrae Gardens was in full compliance with the program during their inspection.

The plan for improvement includes continuous participation in educational programs and SURGE learning with all the employees to ensure that the home stays in compliance. If deficiencies are found a corrective action plan will be completed to address and we will monitor for improvement. Burnbrae Gardens will continue to actively audit and observe employee practices to ensure that risks are minimal for transmission of infections.

Burnbrae Gardens' goal is to work towards being below the provincial average for all infections.

Summary

OMNI Health Care is committed to promoting a Person-Centred culture of quality. Our Quality Matters program incorporates the principles of quality improvement to monitor, measure, evaluate, plan and implement continuous improvement initiatives.

For more information about the OMNI Quality Matters Program, contact Becky Brownson.