

Continuous Quality Improvement Initiative - Interim Report 2022-23

OMNI Health Care Forest Hill

Quality Improvement Lead Nicole Fulford, Director of Care.

Overview

At OMNI Health Care Forest Hill 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 Forest Hill 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, Forest Hill 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 currently do not have a family representative to lead our Family Council. We organize biannual meetings with guest speakers to provide education and information. We recently hosted this meeting virtually due to the ongoing pandemic; increased attendance was noted, and this option will be considered on a go forward basis. The voice of our Residents and their families continues to be our top priority. We provide information to families and caregivers during the admission process and work to keep families informed of developments at the home through the use of communication boards in the home and monthly letters to families.

We are looking forward to the further loosening of provincial covid 19 restrictions that will allow us to return to hosting family bbq's, on-site Christmas parties and Easter brunches.

The plan for improvement includes recruiting a family representative. Our goal is to seek a family council member as we believe that Family and Resident Council guides our decision-making process in the way that care, and delivery services are provided in the home.

Priority #2 Recruitment and Retention

At present, we are actively attempting to recruit staff for all departments in the home, we strive to provide timely, safe, and effective care for our residents needs. We currently have a Staff Development Coordinator to assist with this process.

Our main goal is to minimize the number of times units work without allotted number of staff as per the Master Schedule by ensuring all positions are filled.

OMNI Health Care has a bursary program to assist our staff in achieving their goals of higher education. The home will work to promote this more as part of our recruitment efforts.

The plan for improvement includes actively recruiting staff through websites and online job boards. We also engage and maintain affiliations with local schools, hosting students for clinical practice and consolidation hours, with the aim of hiring them in the future upon completion of their program.

Priority #3 Infection Prevention and Control

At present, we have an IPAC Practitioner and leadership team that meet daily to address the needs of the home. Forest Hill also has an active interdisciplinary IPAC Committee that meets quarterly.

Home continues with Active Health Screening prior to entry to the home for all staff, family members, ECGs and visitors. Active Health Screening includes a health questionnaire and Rapid Antigen Testing daily for all entering the home.

Mask Fit Testing on-site for all staff and ECGs. Mask Fit Test results maintained on file for implementation should the need arise.

IPAC lead completes weekly audits regarding hand hygiene, proper PPE, screening & testing audits for staff and visitors to the home. Compliance monitored and when necessary, redirection is provided.

Regular communication with Ottawa Public Health regarding Infection, Prevention and Control.

All IPAC policies maintained, revised and available on Surge Learning platform available to all staff within every department.

Handy Metrics Program utilized to provide staff the opportunity to learn and gain further knowledge regarding proper hand hygiene.

On-going SURGE education assigned to staff related to IPAC measures and best practice.

Home provides annual Influenza Vaccination on-site for all staff to access. Home maintains records of staff vaccination and encourages all staff to participate in vaccination program.

Home compliant with Ministry of Long-Term Care COVID Vaccination Policies for all Staff.

The plan for improvement in this area is to strengthen/further develop existing program/infrastructure to minimize risk to residents, staff and families related to infections. We will continue with our Hand Hygiene and Audit Program that are implemented. We are working to integrate IPAC into everyday practices. Our daily focus is to ensure everyone that lives in, works at, or visits Forest Hill is protected from infectious diseases such as Covid-19, Influenza, respiratory illnesses, enteric illnesses, and all other infections that may be of concern.

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 Nicole Fulford, Director of Care @ 613-599-1991 Extension 15.