

## Continuous Quality Improvement Initiative - Interim Report 2022-23

OMNI Health Care Riverview Manor

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### Overview

At OMNI Health Care Riverview Manor 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 Riverview Manor 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, Riverview Manor 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, continuing to maintain engagement with residents through resident council, and continued family updates.

At present, our Resident Council meets monthly and follows guidelines as they are laid out in the OARC template. Throughout the Covid-19 pandemic we have utilized email to contact families and provide regular updates as situations arise within the home. We have also had our resident council president begin attending our monthly Quality meetings and spent time explaining the content to them.

Family council at Riverview Manor is established however there has been difficulty in recruiting individuals to take part in the council. Upon admission to the home, each family does receive a brochure outlining family council and including contact information for the current President.

Riverview Manor also currently has a Resident Service Coordinator who maintains regular contact with families, arranges additional services, organizes essential caregiver information and arranges for resident activities such as attending events with family.

The plan for improvement includes:

-A monthly update to be sent to families to maintain contact and provide regular updates.

- Active recruitment for our Family Council through our Resident Service Coordinator as well as Life Enrichment Coordinator.
- Administrator to organize regular HIRA assessment meetings as well as reviews of emergency preparedness plans with both Residents and Families
- Increasing the recruitment process for Family Council improved presentation during Admission meeting as well as 6-week post-admission care conferences.

The goal for Riverview Manor is grow our Family Council to at minimum 6 members. Further to this we would like to provide at minimum monthly updates to all families about what is going on in Riverview Manor.

## **Priority #2 Recruitment and Retention**

At present, Riverview Manor has been actively recruiting staff since the arrival of a new Administrator and Director of Care. Both senior managers recognized the challenges of staffing and made it a priority item for improvement since beginning in January 2022.

Since arriving at Riverview Manor, in December 2021, as the acting Environmental Service Manager for the home the current Administrator also did significant hiring in 2021. At this time, we have onboarded approximately 45 new staff since December of 2021 including in Nursing, Environmental Services, and Dietary.

Riverview Manor has successfully developed relationships with both Fleming College and Trent University as well as several small private career colleges. The home has provided placements for more than 40 students in 2022. Significant numbers of our placement students have gone on to accept employment on permanent basis at Riverview Manor.

Further to this a major focus for both Director of Care and the Administrator has been improved retention within the home. This has been done through increased connection with staff, including staff recognition as celebrations of accomplishment for our team at Riverview Manor.

The plan for improvement includes:

- Maintain the continued hiring and onboarding process.
- Continued development of relationships with local educational institutes.
- Development of relationships with staffing agencies to ensure staffing support in times of need.

The goal for Riverview Manor is to continue the hiring and onboarding process that has led to successful recruitment of new staff. The home intends to maintain staff morale through recognition to improve retention.

### **Priority #3 Infection Prevention and Control**

At present, the home has added a dedicated IPAC lead to oversee the IPAC program within the home and to ensure compliance. Riverview Manor has continued to stay up-to-date with the most recent guidance provided by both Public Health as well as the Ministry of Health and Long Term Care, and implemented any new required changes as necessary.

Currently the home has an IPAC team that monthly to review items of importance with regards to Riverview Manor's IPAC program. Riverview has had three members of our team the Queens University IPAC program. We have maintained active screening and continue with ongoing testing daily for all staff.

The plan for improvement includes:

- Continuing to develop our IPAC team to ensure the staff are provided regular updates with regards to IPAC, as well as increasing champions of our IPAC program within the home.
- Director of Care has applied to take the Queen's University IPAC course.
- Increasing auditing in the home to monitor compliance with our IPAC program.
- Onboarding of a new Environmental Services manager to assist in the implementation of Riverview Manor's IPAC program.

The goal for Riverview Manor is to continue to increase the membership of the IPAC team, through this continuing to develop champions of the program.

### **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 Dennie.