

# Continuous Quality Improvement Initiative - Interim Report 2024

Omni Quality Living – Garden Terrace

Quality Improvement Lead –Christine Schyf – Administrator

### Overview

Quality Improvement is a systematic approach to making changes that lead to better resident outcomes (health), stronger system performance (care) and enhanced professional development. It draws on the combined and continuous efforts of all stakeholders, health care professionals, residents and their families, researchers, planners, and educators to make better and sustained improvements.

Quality Improvement is based on an understanding of the system in which we function, the complexity of dealing with people, the variation of outcomes created by the system and the use of knowledge to influence those outcomes.

At Omni Quality Living – Garden Terrace, 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.

Our Quality Improvement Program has a strong focus on safety, well-being, and overall quality Resident experience and aligns with strategic, operational, and provincial plan.

### **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 Quality Living 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 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 Quality Living 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 Quality Living 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 Indictors 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**

The home's Residents and/or Substitute Decision Makers had the opportunity to participate in the completion of the Annual Resident Experience Survey from November 7, 2023, to December 18, 2023. This survey solicits feedback from Residents regarding the level of satisfaction with the care and services provided and gives Residents and their families an opportunity to communicate suggestions for improvement for programs and services offered in the Home.

The compiled results of the survey responses, as well as a home specific Commentary Report, were provided to the home on February 26, 2024, by our partners at Metrics@Work. The home reviewed the results of the Resident Experience Survey and the commentary report with the management team to identify areas of improvement. Our home scored a positive satisfaction result with an average of 91.3 %.

The Administrator presented the Resident Experience Survey Results to the members of the Residents' Council on March 28, 2024, at their monthly meeting. Following the Residents' Council meeting, the home communicated the results of the survey with the Family Council. Staff members were communicated the survey results, and a copy of the results were provided to them on each unit.

Residents and the Family Council were advised that a copy of the Resident Experience survey had been placed on the 3<sup>rd</sup> floor information board and that if they would like a copy of the survey or if they have any questions, to speak with the Administrator.

## Priority Areas for Quality Improvement

Omni Quality Living – Garden Terrace has identified the following 3 areas as the top priorities for Quality Improvement:

Priority #1 – Recruitment and Retention

Priority #2 – Resident and Family Engagement

#### Priority #3 – Infection Prevention and Control

# **Continuous Quality Improvement Process**

Quality Improvement is achieved through the Quality Matters Program at Omni Quality Living. Once priority areas for improvement are identified, Omni Quality Living – Garden Terrace 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 summary of the QI Plan for these priority areas.

#### Priority #1 Recruitment and Retention

At present, our province is facing shortages in every level of the health care system and our home is also affected by the shortages to fill vacant positions and reducing agency usage to maintain adequate staffing level. Currently, we are actively recruiting for Personal Support Workers and Registered Practical Nurses.

The home has the following measures in place for the recruitment of new staff and the retention of all current personnel.

- Advertisements are currently active on Indeed, Omni Quality Living website, staff are encouraged of promoting the home within their inner circle of professional groups.
- Omni Bursary Program to financially assist employees in their pursuit of further education is available for each member of staff up to \$1000 per year.
- Partnerships with several colleges such as: Willis College, Algonquin College.
- Home is providing leave of absence and flexibility with scheduling for staff to attend and further their education.
- Discussion with the LTC Prep coordinator to look at potential hosting opportunities to have students participate in placement in our home to further recruit closer to the completion of the program.
- Home participating with provincial initiatives such as CCPN program as an incentive to ensure retention to up to 2 years.
- Regular communication with schools in the surrounding area to recruit students from various disciplines.
- Distribution and promotion of our Kudos Cards program serving to recognize a staff member.
- Staff Appreciation events are held such as Nurses Week, Holiday events to celebrate Halloween, Christmas, etc. Cotton Candy day, Food Truck like Beaver Tails, Churros Food truck, French fries, and poutine Food Truck were at Garden Terrace in the past few months!
- Staff BBQs are held during the Spring/Summer/Fall months where Managers cook and serve all staff.
- Partnership with the International School of Massage to come in and treat our staff members.

Provision of education in-services at the home for staff to further develop their skills. Example

 Gentle Persuasive Approach, Achieva Physiotherapy training for staff including Proper Body Mechanics, Lifts and Transfers.

#### Planning ahead:

- Communication and further connections with additional educational institutions in our area.
- The home has formed a partnership with Algonquin College for the placement of PSW, RN/ RPN Students.
- Promotion of the Omni Bursary Program to encourage all staff to take advantage of the program and its benefits.
- Providing further opportunities for Gentle Persuasive Approach education for all levels of staff in the home and in all departments. Home recently requested to have a refresher to allow staff members to feel confident in the GPA.
- Reduction for agency usage with goal of elimination of agency use.
- To become an employer of choice with a positive work culture in an inclusive and equitable environment.
- Home to include other celebration events to reach our diverse staff members such as Diwali celebration etc.
- Home to continue to provide staff with opportunities for advancement as a retention strategy. Home is known to promote staff to different opportunities such as BSO champion or management opportunities in the home. Encourage all staff to explore new roles and opportunities within the home.
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### Priority #2 Resident and Family Engagement

Residents and families must be active partners in their care and home is promoting the opportunity to make decisions to experience a positive life experience in their home making them feel that their voice is being heard. We welcome our resident and families as part of our circle of care. In 2023, the home Family Council chair became vacant and promotion on the role within the home was shared with all our family members. We are grateful that the beginning of 2024, a family member expressed wanting to be chair of the Family Council.

The home is promoting an open-door policy amongst the team and communicates with our residents and families through regular email communication and has regular discussion with the home's Family Council chair.

Our home promotes family members to attend activities from the Family Council and encourages them to get involved. Recently, a family member who is an expert gardener has been sharing her passion by revamping our courtyard with a new redesign of shrubs and several additions of perennials. The Family Council has been participating in several events in the garden and several family members have been volunteering.

When the home changed the covid-19 testing requirements as per the ministry guidelines received, the home consulted with the Family Council chair to involve them in the process as they would be able to provide their experience as family members and validate suggestions to the home regarding the implementation process. They have expressed that they felt empowered by being able to voice suggestions and work along with the home with the implementation of a new process that would be affected each time they visit the home.

Recently the Resident Council expressed wanting to have a gazebo in the front of the home to provide shade from the sun and as such, the home sought available governmental grant to see a new project taken place to improve the quality of life from our residents.

#### Planning ahead:

- Continuing to encourage all family members to participate in events and meeting the newly appointed Family Council chair to be able to have a voice in the operations of the home.
- Continue to inform Residents of our open-door policy and come to the management if any concerns as they do not need to wait to attend the next Resident's Council meeting to continue to ensure a positive life experience in their home.
- Home will communicate the need and desire for more volunteer opportunities to also expand our volunteer team in the home.
- Working with the Family Council to arrange a partnership with an intergenerational program with the high school and the residents.

### Priority #3 Infection Prevention and Control

Our home has been told to be a "success story" during the early days of Covid -19 in 2020-2021 but there is still work to be done the area of infection control as it is directly linked for the well-being of our residents and staff to maintain adequate staffing level and decrease absenteeism due to sickness.

Within the past few years, we have appointed an Infection Prevention and Control (IPAC) Lead whose role is dedicated to measures, audits, education, and compliance of all matters related to IPAC. The home's IPAC has successfully completed the Queen's Infection Prevention & Control (IPAC) Online Professional Development Course and is currently working towards obtaining their Long-Term Care Certification in Infection Prevention (LTC-CIP)

Garden Terrace currently employs the following practices.

- IPAC promotes the 'best guideline practice" and utilizes "teachable moments" with our staff.
   Compliance is monitored throughout the home and when necessary, redirection is provided in a positive manner to ensure adherence to the best practice guidelines.
- The IPAC lead completes weekly audits regarding hand hygiene for staff and Residents as well as proper PPE donning/doffing audits for staff and visitors to the home.

- Regular communication with Ottawa Public Health and the Regional Hub regarding Infection, Prevention and Control. Home representatives participate in external audits with the Regional IPAC Hub.
- All IPAC policies are maintained, revised and available on Surge Learning platform available to all staff in every department.
- Mask Fit Testing on-site for all staff. Mask Fit Test results are maintained on file for implementation should the need arise. The home's IPAC is trained to complete Mask Fit Tests or will ensure an external provider is completing the testing to maintain compliance.
- Communication is done in a timely manner with Residents, Family members and staff members regarding updates or changes in directives.
- Speedy Audit 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 and Covid vaccination on-site for all staff to access and most recently TB testing for new staff members who are having difficulty in accessing family doctors or an appointment to a medical clinic. 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.

### <u>Planning Ahead:</u>

- Continued vigilance in implementing, adapting, communicating, and enforcing all IPAC guidelines and necessary changes as given by the Ministry of Long-Term Care, Public Health Ontario, and Ottawa Public Health.
- Home to continue to reinforce the importance of all staff participating in the high touch cleaning and daily documentation in binders for the designated areas to maintain compliance.
- The home has a certified specialized RN for wound care who is currently completing further education to become an Enterostomal Therapy nurse.
- The home has obtained approval from our Medical Director to allow the Director of Care to administer TB skin testing for staff and Residents. A Medical Directive has been signed by Dr. Mackenzie and our home will begin to provide TB testing on-site for staff.
- Home to encourage staff to receive their annual Influenza Vaccination and covid vaccination through incentive measures.

Our goal is to ensure that the highest standards related to IPAC measures are achieved and maintained at Garden Terrace. Our goal is that all partners in our home, staff, family members, ECGs, visitors etc., work together to provide a home and work environment that is clean and safe for all that live and enter.

### Summary

Quality health care means doing the right thing, at the right time, in the right way, for the right person and having the best possible results in which we are committed in achieving in our home.

For more information about the Omni Quality Matters Program, contact Omni Quality Living – Garden Terrace Quality Improvement Lead Christine Schyf – Administrator at #613-254-9702 ext. #224 or via email – <u>cschyf@omniqualityliving.ca</u>