



## Continuous Quality Improvement Initiative - Interim Report 2024

Omni Quality Living – Streamway Villa

Quality Improvement Lead – Kylie Morton Administrator/Director of Care

### Overview

At Omni Quality Living – Streamway Villa, 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 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 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

The residents and families had the opportunity to participate in the completion of the annual Resident Experience Survey that took place from November 7 to December 18, 2023. Survey results were prepared by Metrics@Work and provided to the home in February 2024. An initial review with the resident council at Streamway Villa took place on February 25<sup>th</sup>, 2024. The feedback from Residents regarding the level of satisfaction with the care and services provided give the residents and families an opportunity to communicate suggestions for improvement for our programs and services offered at Streamway Villa. Overall results were above the 85% mark and many positive reviews in the commentary were shared. During the Administrator's Community of Practice meeting held February 28 and 29<sup>th</sup>, 2024 it was reviewed and discussed that a continuous improvement plan would be required for all area that were under 85%.

A continuous action plan was submitted to home office on March 15<sup>th</sup>, 2024, with work and audits being completed during the month of March. Resident council was informed at their March 2024 meeting that audits were being completed in a few areas of concern and action would be taken to resolve and/or correct some of the residents' concerns. All staff reviewed survey during March staff meetings. Mandatory meetings have been scheduled for April 17<sup>th</sup> for all nursing shifts and staff to review the results of the audits and actions and will be shared with the resident council and family council meetings in April and May 2024.

The home communicated with families at their March 25<sup>th</sup>, 2024 meeting that the Survey Results, CQI Action plan were posted on the Quality Improvement board. All family and residents were advised that if they would like a copy of the survey and action plan or wished to discuss the survey or plan to speak with Administrator/Director of Care.

## Priority Areas for Quality Improvement

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

Priority #1 – Resident and Family Engagement

Priority #2 – Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.

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 – Streamway Villa 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. We believe that our Residents' families must be active partners in their care. We welcome them as part of our care circle and as advocates for their loved ones' overall quality of life.

In 2022-2023 we had a small group of family members prior to the pandemic that were quite involved with the home. Currently, those family members loved ones have passed and we continued to recruit our new families to build a new family council once again. Our LEC is worked with our resident council and through monthly communications with families to engage in forming a council. Our goal in 2022-2023 was to have a family council in place by September 2023. This goal was not accomplished; however, we have established a family council. Their first meeting took place on February 25, 2024.

The plan for improvement included better promotion and communication and to engage our family members what a family council is and how it can enhance the lives of the residents at Streamway Villa. LEC will send out invites in the monthly billings to all family members and encourage them to join us. The LEC had an open house in August 2023 to hopes to recruit family members to join. LEC attended the initial meeting to give further details and get the council members excited. We also offered 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.

Streamway Villa's goal is to have strong attendance at our quarterly family council meetings. The next family council meeting is scheduled for May 2, 2024.

Priority #2 Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.

Currently at Streamway Villa we manage our antipsychotic use with an experienced multidisciplinary team. As an early adopter BSO home, we have evolved utilizing PDSA (Plan-Do-Study-Act) methodologies, into more sustainable model as our home in small. All of our Registered staff are BSO trained and work together with the leaders, physician, pharmacy consultant and our external community partners to manage our population of residents with responsive behaviours. 90% of our current population has a diagnosis of dementia, and 85% of our current population are currently managed and monitored through our BSO program. Our target is to reach the provincial targets and maintain those targets on our current population with the emphasis on Hope Purpose and Belonging to each resident who lives at Streamway Villa.

Education is the key for our front-line staff, including dietary, housekeeping, maintenance, and nursing. DOS documentation education has been provided to all nursing staff members and is reviewed by Registered staff. Documentation and communication from all staff to registered staff is valuable and key to success of our residents and management of antipsychotic use.

Some of the methods we currently use are;

- Education to all nursing staff on the importance of accurate documentation and reporting, communication, use of Whiteboards and encouraging staff to re-engage in its use.
- Education for all nursing staff including our agency registered staff to review medication orders, to assess, plan and evaluate whether to change/continue/discontinue the medication.

- To follow policy and procedures regarding quarterly assessments and review, as well as BEERS list, BSO documentation and assessment to ensure the treatment and plan be left in place for 3-4 months for effective progress or discontinuation.
- Data is collected in the home monthly, and metrics are completed and sent to CE LHIN BSO program for continuation of funding. Metrics are discussed at our monthly QI meeting and Registered Staff Practice Meetings regarding those residents on our BSO programs and those receiving antipsychotic medications.

### Priority # 3 Infection Prevention and Control

At present, Streamway Villa 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 Health guidelines. Our IPAC Lead 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. He 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 has throughout the pandemic continued our quality improvement meetings monthly, with a large emphasis on our IPAC program. Our IPAC lead contributes to this meeting and attends all staff meetings to ensure clear IPAC expectations, education, and support. Our IPAC lead has participates in our quarterly Medical/Pharmacy Advisory Committee meetings to date and ensures all our practices are transparent and consistent with the required IPAC standards.

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. Streamway Villa will continue to actively audit and observe employee practices to ensure that risks are minimal for transmission of infections. Our IPAC Lead continues his education requirements for CIPAC certification required by the new legislation and is looking forward to bringing more improved IPAC standards to the home.

Streamway Villa's goal is to continue being below the provincial average for all infections and to ensure that the highest standards related to IPAC measures are achieved and maintained. 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

Omni Quality Living 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 Omni Quality Living – Streamway Villa Country Quality Improvement Lead – Kylie Morton Administrator/Director of Care Director of Care at 905-372-0163 or via email – [kmorton@omniqualityliving.ca](mailto:kmorton@omniqualityliving.ca)