

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

February 25, 2023

OVERVIEW

AgeCare Brant Long-Term Care Residence is a 175 bed facility, located in Burlington, Ontario. Our current population consists primarily of older adults, over 80% of which are identified as being over the age of 65, many of whom are physically frail and unable to independently pursue activities of daily living, requiring care and support from our staff and team. The home has 7 neighbourhoods and 1 of these neighbourhoods is dedicated to residents with advanced dementia.

The home offers care services with the support of our Physicians, Nurse Practitioners, Dietitian, Physiotherapist, Occupational Therapist, Music Therapist, Social Worker, Pastoral Care and others to support a holistic approach to care. Residents have access to additional services such as foot care, hairdressing, optometry, dental care, etc.

We continue to drive Chartwell's four pillars of "wow", in the residents' dining experience, social experience, palliative care and dementia strategies through ongoing quality improvement, resident-driven initiatives, programs and opportunities. We are people working to "create happier, healthier, more fulfilling life experiences for our residents".

Our home uses resident and family satisfaction surveys, CIHI indicators, in-house workbooks, employee engagement scores, and other indicators as part of our Continuous Quality Improvement program. We have a Continuous Quality Improvement team which consists of the Administrator, Director of Care, Department Leads, a member of the resident's council, a member of the family council, the Medical Director and external partners such as pharmacy,

physiotherapy, Dietitian, and Public Health. the team meets quarterly to review our results and to make recommendations on quality improvement opportunities which are identified. The home also has sub-committees that focus on various programs within the homes such as our Falls Committee, Skin and Wound, Continence, Pain and Palliative Care, Resident Council, Family Council and others.

For our 2023-24 Quality Initiatives, we will be working on CIHI indicators related to Antipsychotic Usage, Worsened Depression, and Falls. Our home benchmarks these indicators with both the Province and with our other AgeCare homes. We strive to be better than the provincial average on all reportable CIHI indicators.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Quality initiatives was reprioritized in response to the Covid-19 pandemic. The home has focused on ensuring the safety of our residents and staff. Quality initiatives revolved around infection prevention and control measures such as screening and testing protocols, enhanced cleaning and disinfection, surveillance and ensuring staff had access to personal protective equipment and were educated on IPAC measures such as proper donning and doffing techniques, hand hygiene and physical distancing. Other initiatives included a focus on enhanced communication as Ministry and Public Health directives changes or when the home experienced a Covid-19 outbreak.

Despite the pandemic, the home continued to provide optimal care and services to our residents. Our quality indicators mostly remained stable or continued to show improvements. The home continued to try to provide meaningful activities to engage our residents and bring joy to their lives.

With the new Fixing Long-Term Care Act and Regulations, there is the need to enhance infection prevention and control programs with additional support by our Medical Director and Community Partners. There is also the need to further enhance our palliative care program by incorporate a palliative philosophy model of care. As we look to set our priorities, we will be engaging our Resident and Family Councils.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

Restrictions imposed on our resident and home due to the pandemic brought on new challenges. Residents spent days in

isolation due to Covid-19 outbreaks or separated from their loved ones due to visiting restrictions that were imposed to prevent the spread of the virus. The home looked at a variety of means to keep residents connected with their families and friends such as offering virtual visits through Zoom or Facetime, setting up window visits, arranging telephone calls, and sending email updates. The home also ensured that residents and their families were always kept up-to-date with changes to directives affecting the residents and their visitors by way of email communication, letters, posters and bulletins, informing Resident and Family Councils, and neighbourhood touch points. Residents and families were reassured that residents safety and well being was our top priority.

The home has developed strong partnerships with our local Public Health units, the hospital, our LHIN and other community partners as we navigated the pandemic. Many of these partnerships will be sustained even when the pandemic is over. To determine how well the home responded to the pandemic, the resident satisfaction survey was adjusted to include pandemic response and if the residents felt safe.

Annually, the home gathers feedback from our residents and family on their satisfaction with the care and services that we provide. The survey was done in June 2022 and we were able to share the results with our resident and families in the fall of 2022 at the resident and family council meetings. We look at our "very satisfied" responses to the survey questions as we feel this reflects optimal care and services for our residents. We identify trends and develop action plans to improve our results with our resident and family input. Our plan is also reviewed and progressed tracked by our Continuous Quality Improvement committee.

PROVIDER EXPERIENCE

The pandemic brought to light systemic issues related to human resources available to support our homes. Due to staffing shortages, the home had to engage in a variety of strategies to ensure we had the resources to care for our residents. The home partnered with employment agencies and offered agency staff consistent schedules for long periods of time to create consistency in care and enable staff cohorting by neighbourhood; this was also supported by the corporate office Agency Hub. The home also partnered with colleges and universities to host student placements in all departments and was able to recruit new staff to work in our homes. Our own staff stepped up and worked overtime shifts and even stayed in hotels to keep their own families safe. Our home continues to work on recruitment strategies with job fairs, postings and employee incentives.

The staffing challenges and the impacts of the pandemic have played a toll on the mental health of our employees. To support our staff, opportunities to engage in counselling were offered, staff have access to an Employee and Family Assistance Program, events and activities such a treat days were done to show our appreciation, and staff continue to receive LifeSpeak wellness blogs to support them in their work and personal lives.

Annually the home seeks feedback from the employees through our Employee Engagement Survey. It was done in the second quarter of 2022. The home shares the results of the survey with the employees and seeks input on how we can improve job satisfaction for our employees.

WORKPLACE VIOLENCE PREVENTION

The health and well-being of our residents and staff is very important to us. We have several programs in place to support our Workplace Violence Prevention program.

Mandatory Violence, Harassment and Bullying Prevention education is required for all new staff and annual refresher training following. We have policies that support our reporting of concerns such as our Abuse and Whistleblower Protection policies. All residents and their families are made aware of our Abuse and Whistleblower policy during our move-in process. We also ensure that they are made aware of how to offer feedback and to report a concern or complaint.

Our home also participates in emergency preparedness. The home practices our Code White annually and ensures staff have the education to respond. Staff receive Mandatory education related to Responsive Behaviours/Personal Expressions, Dementia and Mental Health. AgeCare has developed the IMAGINE program that supports residents living with dementia. Many of our front line team members attended external training sessions and have become Ambassadors of the Imagine Program within our home. We look at way of engaging our residents in meaningful activities to prevent expressions. We also utilize our Behavioural Support Ontario team to support residents with expressions that are difficult to manage. Residents have specific plans of care which identify triggers and interventions and we use 1:1 staffing where needed until we are able to find interventions that effectively support our residents with expressions.

The home also has an active Joint Health and Safety Team that

reviews Employee Incidents and makes recommendations to our Leadership team on how to prevent similar incidents from recurring. We also have a Corporate Health and Safety team that supports our home with WSIB claims and access to resources to support our staff such as our Employee Family Assistance Program.

PATIENT SAFETY

As the pandemic settles, our hope is to reinvigorate our quality programs and set new priorities based on the feedback obtained through our resident and employee surveys, opportunities for improvement gained through the pandemic experience, and opportunities focused on meeting our mission of "Making People's Lives Better".

The home will be refocusing on our Imagine Program which supports our residents living with dementia, to have meaningful life experiences, and live to their full potential. We will be looking at our Montessori programs, updating activity calendars to include more opportunities for residents to enjoy the outdoors, educating additional staff on the program, and focusing on each resident's individual preferences and interests.

Our home currently focuses on many areas to support resident safety such as:

- Incident Reporting, investigation and trending
- Medication Safety with review of medication errors, drug utilization, administration audits, and the use of the Medications Safety and Technology Funding. This year we introduces Automatic Drug Cabinets.
- Utilization of BSO support and external Geriatric Psychiatry to support residents with expressions
- Tracking and trending of complaints after thorough investigation
- Infection Prevention and Control with active screening and testing, IPAC audits, ongoing education for residents, staff, and families, and our Just Clean Your Hands program.
- Annual evaluation of our care and services.

HEALTH EQUITY

Our home strives to get to know our residents during the move-in process and identify their individual beliefs, values and customs. We prepare a summary that can be shared with our team members which promotes active discussions with residents, engagement in activities that provide meaning and the development of a plan of care that is based on their wishes and preference. The home seeks to make connections with external partners where needed to support social and spiritual needs of the individual. The home also hosts social events and programs that support a variety of cultures.

AgeCare also developed a corporate Diversity and Inclusion Committee designed at supporting our employees. This committee has provided the homes with education and material as the committee was further developed in 2022. All team members participate in education annually on Surge Learning regarding Diversity and Inclusion and the team continues to seek ways to ensure it is practiced in the home.

AgeCare Brant LTC is a diverse, multicultural home and we often reach out to our team members and families/friends for support with education and communication/language barriers. The quality team reviews ethical concerns as well and the discussion is then taken to the PAC committee to ensure we best support our residents' needs.

CONTACT INFORMATION/DESIGNATED LEAD

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SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on **February 25, 2023**

Mandy Warner-DRO, Board Chair / Licensee or delegate

Kelly Kontkanen-Administrator, Administrator /Executive Director

Kelly Kontkanen-Quality Program Lead, Quality Committee Chair or delegate

Barb Murphy-Director Quality AgeCare, Other leadership as appropriate
