

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 10, 2023

OVERVIEW

White Eagle Residence is a Long-Term Care Home located in downtown Toronto, with a capacity for 55 long term care beds and one short stay bed. Currently though we are home to a maximum of 38 residents, in accordance with Ministry's directives.

Our population is unique. Our residents' ages range from 45 to 98 years old; a large number of them have no family to offer support nor help with care or financial decision making, so we do a lot of work with the Office of the Public Guardian and Trustee. Many of our residents also have challenging mental health issues, some have had addiction and even been homeless. Managing all expressions and behaviours related to mental health illnesses and dementias is truly crucial at our Home for everybody's wellbeing. Our Behaviour Support Lead does excellent work in close collaboration with BSO Baycrest and our team members, especially those involved with our Imagine initiatives – which are focused on residents experiencing life to their potential, an integral part of quality of life.

Our building is 50 years old already and as such it may be not the first choice for some - based on appearance. Our small size gives the Home a cozy familiar feeling though. And what we lack in amenities we outmatch in heart - we have a great team that "gets it". Our managers and staff are caring, compassionate and come to work each day to genuinely make a difference in our residents' lives.

The Home is committed to quality of life of our residents and ensure they live in a safe and secure environment while meeting their individual physical, spiritual and emotional needs – through

continuous Quality Improvement processes and initiatives.

The Home's Continuous Quality Improvement Committee – which steers all those initiatives - is led by the Home's Administrator and includes representatives from all disciplines, a resident and a family member, the Home's Medical Director, and other partners such as our Pharmacy and Physiotherapy liaisons. We also invite representatives from external organizations to share relevant quality initiatives from our community at large. A recent example was the Coordinator of the Long-Term Care Best Practices Program from RNAO – an initiative our Home has already embraced as part of our Company.

We maintain ongoing 3 year accreditation status with CARF, a continuous testament to our commitment to Quality. Our Mission “To make People's Lives Better” is our benchmark and it says it all.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

As all over the world, at the Home we have continued to experience the ongoing challenges associated with COVID-19 and its unprecedented impact in LTC - including the ongoing changes in directions from Ministry and Public Health.

At this point though we are re-focusing on Quality in the Home, guiding and supporting staff to provide the best possible care and services for our residents, based on their individual needs, abilities and preferences.

The Home implemented requirements for the new Fixing Long Term Care Act and continues to find successful solutions for the generalized human resource challenges the sector continues to experience.

Throughout we have continued to do really good work and our Quality Indicators show it.

We are very proud of our team's efforts and are confident we will improve the % of residents that are highly satisfied with their meals and meet our set targets in 2023-24.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

The Home works closely with our Residents' Council year round. At the monthly regular meetings our residents have an open and safe forum to bring forth concerns and suggestions about any aspects of their daily life and we follow up with all to their satisfaction.

The Council also has an opportunity to provide feedback on the annual Survey designed to assess their Satisfaction levels. When the survey is open for completion in the month of June we ensure there are team members available to provide clarification, support and/or assistance as needed. Later on the results are shared with the Council for further feedback focused on the areas identified as

needing improvement. This is done in the fall once the results have been received and reviewed by our Leadership team. It is a cyclic process - to ensure continuity, progress and ultimately quality.

Over the years we have encouraged families to form a Family Council and continue to do so. In the absence of a formal group, and as typically we have had low number of families involvement, we have invited families to Family Information Nights as an opportunity to address questions or concerns from caregivers in a format that allows for discussion and reflection.

Seeing an increase in the number of family members and their involvement - which is great to see for our residents - we are hopeful to have planted enough seeds to have a budding Council form. We were really pleased to have a family member join us at our Quality meeting this January and once again offered information, guidance and support to this effect.

We put a lot of effort on communication with our residents and families. We believe that open, honest and timely communication with all is essential to build trust and allows us to work as better teams in finding solutions and improvements for our residents' well being and quality of life.

PROVIDER EXPERIENCE

We are equally dedicated to Employees' satisfaction and engagement levels - as motivated and committed employees will provide better care and services to our residents.

As such, we all have an opportunity to provide feedback at our annual surveys to rate our satisfaction levels and offer comments and ideas to improve our workplace.

We were pleased with the Home's overall results of 47% high

engagement in 2022 - a 9% increase from the previous year - and aim to go higher this year. Naturally we enjoy organizing activities and events throughout the year to acknowledge our staff's hard work and commitment and to celebrate our results.

In these times of COVID when the LTC sector has been through more constant stresses and significant challenges than usual, it is very important to have an Employee and Family Assistance program we can all utilize for support as well as further resources to promote better Mental Health - and we are fortunate our Corporate leads have made them available to all.

We also benefit from a Corporate recruitment strategy that includes referral bonuses to current team members, and support for the Homes with Recruitment Job Fairs - amongst other creative initiatives to help curve the current ongoing staffing challenges.

Although not ideal, having strong contracts with multi agency partners is a need, and we utilize their services when/where required. However, we focus on student learning and mentoring, have been successful in hiring students that we have trained in house, and will continue our strong collaboration with the Colleges for our benefit and that of other Homes that may hire our trained students. As far as we are all providing well trained staff to take excellent care of our residents, it's a win!

Lastly we also acknowledge the positive impact of the pandemic premium in place for PSWs thanks to additional government funding, as well as resources to assist with retention of Registered staff.

WORKPLACE VIOLENCE PREVENTION

We review the Workplace Violence Prevention policy annually and reinforce to all residents, families and team members our RESPECT values.

All team members receive education on Workplace Violence Prevention policy upon being hired, and review annually thereafter. Related to this and as equally important is the Whistleblower protection and policy, which protects anyone bringing forward information. There is not tolerance for any breaching of either policy.

We are also educated on Responsive behaviours/personal expressions, Dementia, Mental Health, and more recently the initiatives of the IMAGINE program - which focuses on how to better understand the meaning behind our residents' expressions, how to engage them in meaningful activities, and ultimately how to enhance the experiences of all our residents and as such their quality of life.

We are all also trained on Code White, so we are well equipped to respond in a safe manner to potential violent behaviours from any resident, family, staff or visitors.

Our Joint Health and Safety Committee, made up of managers and front-line team members, completes a risk assessment annually, reviewing and sharing any feedback with the Home's leadership team to address.

We follow up with the findings and recommendations from their monthly meetings as well as their monthly inspections and any individual concerns brought forward following requirements of the Occupational Health and Safety Act.

Further supports for our team members in this area include the Employee and Family Assistance Programs mentioned on the

previous section, WSIB for any workplace injuries and AgeCare's Corporate Health and Safety team.

PATIENT SAFETY

Ensuring our residents' safety is key, and we have reporting mechanisms in place to that effect - such as written documentation in Point Click Care and verbal reports at each shift exchange. Any incidents affecting residents are communicated this way, and if required they are also reported further through the Mandatory or Critical Incident system.

In-house, Critical Incidents are reviewed with at our Leadership team, with the staff, and at the Professional Advisory Committee and Continuous Quality Improvement Committees. The same applies to complaints, medication errors, falls and infection rates to name a few - which are also indicative of safety and tracked, reviewed, and analyzed in an ongoing basis.

Specific examples of concrete measures around safety are the annual Medication Safety Self-Assessment which guides the Home's focus with regards to safe medication management, and the introduction of an Automatic Drug Cabinet to dispense medications more safely and securely. Also the use of Falls Prevention funding to provide individualized effective interventions to residents at risk in this area.

HEALTH EQUITY

Our Home is dedicated to an inclusive environment for all residents, families, visitors and team members. We are proud of the diversity of our residents and workforce and promote dynamics to the effect that everybody feels equally accepted and included.

For years we have celebrated cultures from all over the world, via special events for both residents and staff to enjoy, with emphasis on those reflected in our own population backgrounds but also including any country or event our residents may be interested in learning a bit more about.

In a more formal way, our values of RESPECT guide our collective behaviour and the expectation to be respectful to everyone at all times certainly also supports inclusion. We also have a Cultural Competency and Diversity Plan, and use data collected for Residents in Point Click Care assessments and Recreation Assessments for example to connect with community organizations for supportive programming for residents. Lastly, we also maintain a list of team members who speak languages other than English who can support residents and families in their own languages.

In keeping with the times, 2 years ago our Corporate leads have launched an Inclusive and Diversity Committee that has started to gather more focused demographic data on annual staff surveys for example, as one of various initiatives focused on promoting more inclusion in the Organization as a whole.

CONTACT INFORMATION/DESIGNATED LEAD

Adyanes Lachowski
Administrator - Quality Program Lead
White Eagle LTC Residence
138 Dowling Ave TO ON M6K 3A6
416 533 79 35 x 224

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
March 10, 2023

Christine Maragh-DRO, Board Chair / Licensee or delegate

Adyanes Lachowski-Administrator, Administrator /Executive Director

Adyanes Lachowski - Quality Program Lead, Quality Committee Chair or delegate

Barb Murphy-Director Quality, Other leadership as appropriate

White Eagle Long Term Care prides themselves on offering care and services that meet or exceed our resident's expectations. With that principle in mind, the home focuses on resident satisfaction results on residents who "strongly agree" with survey questions.

Overall Resident Satisfaction

Overall resident satisfaction is based on the following two questions:

1. I am satisfied with my residence as a place to live.
2. I would recommend my residence as a place to live.

50% of White Eagle residents indicated that they strongly agreed with both statements which gave our home a 50% overall resident satisfaction rating.

Resident Satisfaction by Service Area

The survey is broken down further into satisfaction by Service Area: Programs and Activities, Environmental, Residence Management, Staff, Nursing, and Dining Services.

Our Programs and Activities department scored the highest with 53% of residents strongly agreeing with the survey questions which focused on activities, opportunities to build friendships, and engagement. Overall satisfaction is 87% (strongly agree and agree).

The area that was identified as having the most opportunity for improvement was Dining Services, scoring at 34%. Survey questions that related overall satisfaction with Dining Services included pleasurable dining service, food quality and variety in meals.

Quality Improvement

In collaboration with our residents and families, the home has decided to focus on Dining Services for the 2023 Quality Improvement Plan. The home's goal is to increase residents strongly agreeing to the question "I like the food here". This will help increase our overall resident satisfaction score in this area.

Initiatives that are planned for 2023 include:

- Planning and implementing monthly "special" meals that are based on input from the Resident's Council and the Resident Food Committee. This will add to the variety of meals served and residents' preferences.
- Focused variety for breakfast options utilizing the input received by the Food Nutrition Manager during 1:1 conversation with residents and communication through the other Residents Councils and Committees.

Our plan will be to engage all stakeholders in improving resident satisfaction with Dining Services from dietary staff menu planning, recreation planning of decorations for special events, care staff services during the meals and leadership oversight and feedback gathering.

Administrator: Adyanes Lachowski

