

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 12, 2024

## OVERVIEW

Regina Gardens is a LiUNA-owned and AgeCare Managed 128 bed, Long Term Care Home. Regina Gardens was built in 2003 and is located on the Mountain in Hamilton Ontario. Regina Gardens has 3 floors and 5 neighbourhoods where residents live, these neighbourhoods are named after local Hamilton attractions: Mohawk Trail, Cootes Paradise, Chedoke Falls and Mount Hope.

Regina Gardens was built with bright open spaces, and large windows in all resident rooms. Most of the resident accommodations are private, and there are some shared accommodations as well where resident privacy is maximized as much as possible. Each neighbourhood has their own dining room, family room and living space available for residents and their families to use. In the family rooms, there are amenities that allow residents and families to do their own laundry if they choose as well as some small kitchen appliances. In addition, Regina Gardens has a family dining room that can be reserved, a Celebration Room for programs, events or for private use as well as a Chapel, Hair Salon, Cafe and over night guest room.

Aside from 24 hour nursing services, Regina Gardens proudly offers the following: regular Physician visits, Pastoral and Spiritual Care, Recreational Services, Physiotherapy and Occupational Therapy, Hairdressing, Foot Care, Dentistry and Diagnostic Tests and Exams.

Our Mission is to create a home where residents are honored as individuals and where we provide the best quality of life experience with the support of team members and families. We foster this by focusing on the following areas: Dementia Care, Palliative Care, The Dining Experience, Social-Recreational model of care, Resident and

Employee satisfaction surveys, feedback obtained through resident and family council or through our open door policy and analysis of quality indicators, provincial initiatives and benchmarks.

Our Continuous Quality Improvement Committee oversees the quality program in our home and is lead by the Administrator. The interdisciplinary team consists of the home's Leadership Team, a resident and family representative, front-line team members and external partners that support our home such as our Medical Director, Dietitian, Pharmacy Consultant and other allied health professionals. This team meets quarterly to review survey results, data and input received from our resident and family councils, team members, external partners and our other sub-committees. After analyzing and trending home results, our CQI committee determines the prioritization of improvement initiatives and is responsible for developing action plans. The CQI plans, actions and evaluation of the plan is shared at Resident and Family Council meetings, team-up meetings with staff members and posted on our home websites.

In 2023, our home focused on the following areas: Decreasing ED visits, Decreasing the use of Antipsychotics without a supporting diagnosis and increasing our resident satisfaction to strongly agreed to "I enjoy Meal times". We were unable to reduce ER transfers from 10.37 to our stated goal but we did initiate some initiatives that will move us forward. One initiative was the introduction of fall kits on each home are that easily accessible and contain items such as non slip socks, hip protectors, and bed and clip alarms that could be put into place as soon as a falls risk was identified. Additionally, the consistency of our Physicians plays a huge role as they are familiar with our residents and have open discussions regarding

goals of care with families early on so that goals are clear and understood by all involved. We were able to reduce the use of antipsychotics without a supporting diagnosis by 0.91%. This was achieved through comprehensive medication reviews along with BSO teams both internal and external on hand to assist with transitional support of new Residents. Unfortunately we did not meet our goal of increasing our resident satisfaction to strongly agreed to "I enjoy meal times" despite offering more variety at meal times such as dine in meals from Pizza Pizza, McDonalds, Chinese food, KFC and Swiss chalet. We also had fish and chips for Good Friday, Men's groups with beer and wings and weekly summer BBQ's. We also changed some Food Committee meetings to travelling meetings to try and capture more residents along with the Cooks attending food committee meetings to receive feedback from residents. We will continue to focus on this area this year. For additional information, please refer to the QIP Progress report.

For the upcoming year, our CQI committee has prioritized the following areas: Reducing ER Transfers, Improving our resident satisfaction to strongly agreed to " I enjoy meal times" as we did not reach our goal last year, and reducing the percentage of has fallen. Although our quality indicator for has fallen is below both the company and provincial average, we feel there is room to improve in this area.

## ACCESS AND FLOW

Our home is committed to supporting our residents across the care continuum and supporting provincial strategies to avoid unnecessary hospitalizations and avoid emergency visits. To support this initiative we continue to partner with the Nurse Practitioner, Pain Specialist and Palliative Care Physician through our LHIN. We were also able to add additional Social Service Worker hours to support resident transfers across the continuum of care within our home.

We have also implemented the use of technology to improve resident care, Our home partnered with acute care hospitals in a data sharing initiative AMPLIFI to improve communication between sectors and we continue to utilize eCONNECT/Clinical Connect to obtain valuable information about our residents' health history to support their plan of care.

Our home continues to enhance our internal programs to support resident care needs. In 2023 we revamped our palliative care program and invited a family member who is also a Palliative Care Nurse to join our committee to share her knowledge and also provide a family perspective. Our home continues to receive consistent support from the BSO Nurse assigned to our home through Behaviour Supports Ontario in Partnership with St Joes Health System to support our residents living with mental health and dementia and our Infection Prevention and Control Lead collaborates closely with our regional IPAC Hub.

## EQUITY AND INDIGENOUS HEALTH

Diversity and inclusion are very important to us at Regina Gardens, we work hard to educate each other and celebrate our differences and what makes us the people we are. We take part in creating events around Black history month, pride month and days for truth and reconciliation.

As part of our Local Service Accountability Agreement with the Province, Our Home has ensured that all our Managers have completed training related to equity, inclusion, diversity and anti-racism and additional training on indigenous cultural safety and awareness. Our goal for 2024 is continue education in both areas for our front line team members.

As part of our Strategic Plan, the home as developed a 3 year Cultural and Diversity Plan. Our plan focuses on programming and events that are culturally specific, Staff support with identity transition and supporting resident mindset. This will be done through education and awareness for our team members and residents

## PATIENT/CLIENT/RESIDENT EXPERIENCE

We are committed to resident-centered care and optimizing care and services for our residents. We engage our residents and families by gathering their feedback and getting input into quality initiatives within our home. We have an active residents council, family council, and resident food committee and we have a resident and family representative on our CQI committee. We gather additional feedback from residents and families through these committees but also through open communication, auditing, concerns and complaints and surveys. We also work with external

partners and align with Provincial objectives

Our 2023 resident/family survey was completed June 27-July 7. Residents who required assistance with survey completion were supported by volunteers or a family member. Our survey focuses on 6 key areas: Residence Management, Home Staff, Nursing, Programs and Activities, Dining Services and Environment. Residents are asked to rate their satisfaction as Strongly Agree, Agree, Mixed, Disagree or Strongly Disagree. As an organization, our goal is to have residents rate their satisfaction as "strongly agree".

Our results were received in December of 2023 and were shared with our Family Council at their Council Meeting held on February 21, 2024 and our Residents Council at their council meeting held on February 22, 2024. The survey is also posted on the Communication board for other residents, families and staff to review.

Our Resident overall satisfaction was 38% strongly agree to the two questions "I am satisfied with my residence as a place to live" and "I would recommend my residence as a place to live". Our home had the highest positive results related to staff respect my need for privacy and respond to my questions and concerns, admin addresses my concerns within an appropriate time frame and I can express my opinion without fear of consequences. Our areas of opportunity were primarily related to dining services, specifically the variety in the weekly menu and I like the food here.

Our additional survey results by service area were:

Staff: 67% Strongly Agree

Environment: 62% Strongly Agree

Nursing: 59% Strongly Agree

Programs and Activities: 43% Strongly Agree  
Residence Management: 42% Strongly Agree  
Dining Services: 38% Strongly Agree

With input from the Residents and Families, Our CQI Committee has determined that Pleasurable dining will continue to be a focus in 2024 with action plans aimed at improving satisfaction with food quality and variety in menu options. The other two priority focus areas will be reducing ED visits and Diversity and Inclusion Training for staff to align with provincial objective.

The final CQI report will be shared with our Resident and Family Councils at the next scheduled meeting and posted on our communication board for all others to view. We will also review our resident satisfaction results and our CQI plan in more detail at the team ups starting March 18th. Our CQI team will continue to follow the progress of the initiatives and continue to gather feedback from others on additional change initiatives that could be considered.

## **PROVIDER EXPERIENCE**

Each year, our organization distributes and Employee Engagement Survey to our staff to obtain a pulse check on their satisfaction with the organization, their employment satisfaction and their work environment. As with our Resident Satisfaction survey, we measure the percentage of individuals who "strongly agree" with the survey questions. Our 2023 survey was distributed through an online portal from June 26 to July 27th. Our employee overall satisfaction was 40% strongly agree to the following 3 questions: "I am satisfied with my organization as a place to work" "I would gladly recommend my organization as a place to work" and "It rarely

crosses my mind to leave my organization and work somewhere else". These are important indicators when looking at retention and recruitment.

The strongest indicators focused on job satisfaction in relation to enjoying the work that is done and having a sense of accomplishment. Job prep in relation to receiving the training needed to perform my job well and having a clear understanding of what is expected of me and co-worker partnerships in relation to being treated with respect by co-workers, my co-workers are dedicated to doing their best work and my co-workers and I work as a team. Our areas of opportunity include Workload, Recognition and communication.

To address some of the human resource challenges The home continues to support students from all departments from a wide variety of Colleges that we utilize as support staff as well as experience for potential hire once they have completed their studies. Additionally, our corporate organization has employed a dedicated recruitment team to assist our home in our recruitment efforts.

We recognize the need to support our team members as a retention strategy. Some of the ways we support our team are through our daily team -ups where two-way conversation is encouraged, employee appreciation events and our Imagine program.

## **SAFETY**

The safety and security of our residents is paramount. Our home has a robust process for responding to resident safety events which includes incident reporting, analyzing safety events and developing individual safety plans. We also track and trend safety events with the use of Point Click Care, Workbooks and Emerging Issue Reporting. Our in-home quality teams and our corporation analyze our data and look for opportunities to improve practices or implement changes to prevent future safety events.

Our home has been able to implement changes or purchase additional equipment/technology with Ministry Funding Initiatives. We have increased our Falls Prevention resources by purchasing additional alarms, fall mattresses and hip protectors. We have a fully functioning Automatic Drug Dispensing Cabinet for Emergency Drugs. In addition the home was successful in implementing a Pharmacist lead approach for medication reconciliation which significantly reduces the risk of medication errors.

## **POPULATION HEALTH APPROACH**

Our home is not part of an Ontario Health Team however, we work very closely with our external partners on proactive approaches to meeting the needs of our Residents.

Our home partners with the Home and Community Care Support Services to review applications for appropriate placement. Our home has been able to support more complex care needs with the support of additional funding for equipment, technology and staffing.

We also have several internal programs that are supported by allied

health care professionals that aim to promote health for our residents. Some of our Partnerships include, Behavior Supports Ontario, Physiotherapy, Occupational Therapy, Registered Dietitian, Pharmacy Consultant, Social Work and others. Each allied health team member brings expertise and suggestions on how to support our LTC Population.

Our home has several external partnerships which support the complex care needs of our residents. We work closely with our local Public Health team and the IPAC Hub in partnership with Hamilton Health Sciences to support the home with Outbreak and Case Management. We also partner with the Geriatric Mental Health Outreach Team through West 5th and St Peters to support residents with reactive personal expressions. We have access to pain and palliative care specialists, nurses with advanced wound care training. We also have access to virtual care platforms for advice or consultations.

Several of our team members participate in local communities of practices such as LHIN meetings where regional focuses are discussed and planned, Public Health Forums, and other forums with other managers in similar roles. Our organization maintains its membership with OLTCA and we have corporate membership on the various committees that look at population health and advocacy for our sector.

## **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 **March 12, 2024**

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**Lisa Smith-Director Regional Operations**, Board Chair / Licensee or delegate

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**Heather Gates**, Administrator /Executive Director

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**Heather Gates**, Quality Committee Chair or delegate

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**Barbara Murphy-Director Quality**, Other leadership as appropriate

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