**Quality Improvement Plan (QIP)** 

# Narrative for Health Care Organizations in Ontario

April 20, 2023



NARRATIVE QIP 2023/24

#### **OVERVIEW**

Delhi Long-Term Care is a home to 60 residents in the heard of the rural town of Delhi Ontario, where we have been providing service for over 50 years. The home is licensed for 60 residents, however currently due to the restrictions in place for C class homes, we currently provide long-term care services to 46 residents. We have a strong focus towards quality improvement that aligns with our organizations mission, vision, and values. We strive to embrace quality and to collaborate with our partners to ensure optimal services for our residents, families and our staff team. We are thrilled to share that in 2022 we were Accreditated with Commendation through Accreditation Canada survey.

Delhi Long-Term Care has been managed by peopleCare Communities since 0211. peopleCare has been awarded one of Canada's Best Managed Companies since 2013 and are currently accredited with Exemplary status through Accreditation Canada. Delhi Long-Term Care has embraced their core values focused on People, Professionalism, integrity, growth, and excellence, and we are thankful to their support and leadership and collaboration that his partnership offers us as a small stand alone family owned home.

Through the past 3 years of the covid pandemic Delhi Long-Term Care is so proud of their values based decision making and the positive impact this has had in their covid response for their residents, staff and families. Through this time we pivoted quickly as a leadership team supported by the peopleCare Communities tea, into incident command where our focus was safety and support to our residents, staff and families. We are grateful to be able to maintain our shift back to our Quality improvement agenda, which was re-initiated last year, and be able to be developing plans

support enhanced experience and quality of life for our residents, and families, and continue with the recovering strong initiative for our staff. This is the primary focus of our Quality improvement Action plan for this year, along with our goal of shifting our culture, and philosophy of care by continuing to improve on our last years quality improvement plan on our palliative care philosophy for all care and services.

To achieve this goal, the facility has developed a Quality Improvement Plan (QIP) that outlines three key areas for improvement; improving on our already implemented palliative care approach, reducing antipsychotic medication without a diagnosis in our resident population and by implementing a resident spotlight to allow staff to get to know the residents better.

The first area of focus for the QIP is improving the palliative care approach. Delhi Long-Term care recognizes the importance of providing quality end-of-life care to its residents and has committed to enhancing its palliative care program to ensure that all residents receive the care and support they need during this difficult time. To achieve this, the facility will be implementing a range of initiatives, including developing individualized care plans for each resident, providing specialized training for staff on palliative care approaches and symptoms management, and increasing the availability of resources and supports for residents and their families through our palliative care committee.

The second area of focus for the QIP is reducing antipsychotic medication in residents without a diagnosis. Delhi Long-Term Care acknowledges the potential risks associated with the overuse of antipsychotic medication and is committed to ensuring that these

medications are only used when absolutely necessary. To achieve this, the facility will be implementing a range of initiatives, including conducting regular medication reviews and assessments, providing specialized training for staff on alternative approaches to managing resident behaviors through our Behavior Support Ontario (BSO) program, and working closely with our medical director and nurse practitioner and other healthcare professionals to develop individualized care plans for each resident.

Finally, Delhi Long-Term Care recognizes the importance of building strong relationships between staff and residents and has committed to implementing a resident spotlight program to allow staff to get to know the residents better. This program will involve profiling one resident at certain intervals through out the year, providing staff with information on the resident's background, interests, and hobbies, and encouraging staff to engage with residents and develop meaningful relationships. This initiative aims to promote person-centered care, enhance resident-staff relationships, and ultimately improve the quality of life for all residents at Delhi Long-term care.

We have examined the key priority indicators from Ontario Health and continue to review and benchmark our indicators with homes in our organization and across the province.

## REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Delhi Long-Term Care, along with all others in the health sector and the province have been leading through an emergency of the worldwide covid pandemic. This required great flexibility and a commitment to ethical decision making to support the safety of our residents, staff and families through an ever changing environment. As we continue to maneuver through these unprecedented times

we are extremely fortunate and happy to be able to come back to a near form of normalcy and continue to work on our quality improvement plans to enhance the quality of life for our residents.

Our QIPs from last year focused on the introduction and enhancement of palliative care based on the new resident rights that were added in the fixing the long term care act of 2020. We have a strong foundation that has grown from our last years progress in this QIP and plan on utilizing this foundation to continue to grow and enhance our palliative approach.

We have met our goal in our last years QIP of improving our satisfaction survey results for residents who would recommend this home to others. This was a major success and we have our quality improvement plan from last year to thank for this. Related to this success we have looked further to see how we can continue to keep our response rate of residents recommending this home to others and through our Quality of Life resident surveys, and our family satisfaction surveys, we had noted a lower response rate for a question that we would like to enhance our response for. This question was "The staff know me" or "The staff know my loved one". This reflection from our last years quality improvement plan and the data from our surveys has lead us to the previously mentioned quality improvement plan regarding the resident spotlight.

We also continue with our recovering strong pathway for our staff and in reflecting on the QIP from last year and the results from our organization wide surveys around recovering strong, we will continue down this path and build trust and relationships with our staff while supporting them with many additional initiatives to continue to recover strong through this pandemic, however we also feel that during the pandemic there may have not have been as large an emphasis on antipsychotic usage in long-term care homes. This is why we have shifted this quality improvement plan to focus on reduction of antipsychotic medication usage in our resident population.

## PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

As an interdisciplinary team we look forward to partnering with our Resident and Family council to support our Quality Improvement Objectives listed in our action plan. We have also initiated a Quality Improvement Committee that meets bi-annually to support in these processes which includes a full multidisciplinary team compromising of a member of family and resident council as well as our dedicated partners.

We also look to optimize our relationship with the region of Norfolk, Ontario Health and our dedicated service providers, and community partners to support us in our goals and objectives.

#### **PROVIDER EXPERIENCE**

Delhi Long-Term Care has a long history of service in Delhi Ontario (over 50 years) and through that time we have developed strong partnerships within our local, regional and provincial communities. We have initiated and continue to work with our frontline teams and leadership support office with a Recovering Strong Strategy. This strategy is to support the staff in combatting the issues our team members are faced with. We have annual surveys that allow our home to have a constant feedback loop with our front line teams to see how they are doing during the process of recovering strong. In the surveys we gather information on how our teams are

feeling, how our interventions and actioned items are supporting them, and how we can continue to improve our services for the frontline team members. We have many events and strategic actioned items that we hold through out each of the surveys to continue to show support and engage our team members in meaningful ways and then continue to ask for feedback from our team members on if these events and interventions are working, and how we can continue to improve.

Delhi LTC through peopleCare has also partnered with CMHA (Canadian Mental Health Association) to provide education sessions on mental health in the workplace and this is geared to support our staff in creating a culture of understanding and also supporting our staff with issues such as burnout and recovery, managing stress in the workplace, embracing mental health and flourishing in the workplace, exercising mindfulness in the workplace and fostering trauma-informed workplaces. We will continue to have a partnership with CMHA as we see the value in bringing mental health to the forefront for our team members to continue to give them the tools and supports needed to work through any of the mentioned areas around mental health.

#### WORKPLACE VIOLENCE PREVENTION

Delhi Long-Term Care is committed to keeping team members safe. As part of our Health, Safety and Wellness program, Delhi LTC tracks near misses and incidents of staff injury involving residents. Follow-ups are done, often including the Behavioral Supports team, to provide strategies for resident care that will reduce the likelihood of further incidents occurring. Our Behaviour Support Ontario (BSO) team provides resources and guidance to team members on how to understand residents' personal behavioural expressions and help to identify individualized support and interventions. This can help to prevent personal expressions that may result in injuries of team members or workplace violence.

Team members receive on-going education and in-services throughout the year on preventing injuries through learned approaches and strategies such as re-directing residents, gaining resident consent and participation with bathing, eating and dressing.

All accidents, incidents and near misses are reported, recorded and shared with our Joint Health and Safety Committee. Senior leadership and the JHSC Co-Chairs complete an annual workplace violence and risk hazard assessment for the home. Results are to identify any actions needed to reduce potential risk factors. Our Workplace Violence and Harassment policy has been updated. Team members complete training annually on workplace violence and harassment as well as whistle blowing. We also have educational materials available for our team members to help them identify additional resources and organizations in the local community for support. In addition, our employee assistance program offers a variety of counseling services and supports for our team members and their immediate family members.

#### **PATIENT SAFETY**

Resident safety is our highest priority. We have several ways in which we track and report incidents revolving around resident safety, including critical incident reporting with the Ministry of Long Term Care, internal incident reporting through Point Click Care, complaints tracking and follow up action planning, whistle-blowing protection, and ways on how to report a concern is posted throughout the home.

We utilize the funding provided by the Ministry for Falls Prevention by purchasing devices that will assist our team members to support our residents and mitigate harm should they fall (i.e. bed/chair alarms, hip protectors, head gear).

Our Medication Safety Technology provides accountability with tracking and administering medications including narcotics. Internally, we track medication errors, infection rates, restraints used, resident falls, resident pressure ulcers, etc. in workbooks. We also receive quarterly statistics on quality indicators and how they compare to Ontario standards. We re also an ISMP champion home and our goal is to improve resident & family understanding of medication management.

Internally, we track medication errors, infection rates, restraints used, resident falls, resident pressure ulcers, etc. We also access quarterly statistics on quality indicators and how they compare to Ontario standards. Our goal is always to be at or below provincial standards. Our Quality Improvement Team and program committees review these statistics and best practices which allow us to look for trends and subsequently develop action plans to put interventions in place. These interventions are communicated at committee meetings, Resident Council and Family Council and added to the resident's care plan where applicable.

## **HEALTH EQUITY**

Our home collects sociodemographic data on our team members in our payroll system. The resident information is gathered in our Recreation Assessment and in point click care upon moving in and onward on a quarterly basis. We try our best to match up team members and residents who speak a common language or practice a common religion to promote unity and offer our residents the ability to better communicate when such language barriers are present. Upon moving in, we develop a plan of care around the resident's preferences related to their cultural beliefs, diet preferences, and daily activities of living. We develop information about the resident through our newly implemented resident spotlight

program that highlights the important aspects of our residents' lives so our team can better engage with our residents. At our resident care conferences, we focus our discussion on resident preferences and choice and what is important to them and how it aligns with their way of living. In 2023 we will endeavour to focus on Diversity and Inclusion as

part of our Recovering Strong strategy for employees in partnership with our unions that will celebrate diversity in our home throughout the year.

## CONTACT INFORMATION/DESIGNATED LEAD

Jeff Willson
Executive Director

NARRATIVE QIP 2023/24 Org ID 52838 | Delhi LTC

## **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 30, 2023

Jeff Willson, Board Chair / Licensee or delegate

Jeff Willson, Administrator /Executive Director

Jeff Willson, Quality Committee Chair or delegate

Other leadership as appropriate