

GRACE AND FAITH MANOR FALL/WINTER 2022-2023 EDITION QUALITY IMPROVEMENT NEWS!

Welcome to the Continuous Quality Improvement (CQI) newsletter. Our CQI Committee will publish this newsletter twice a year. The purpose is to update staff, residents, and families on what quality improvement initiatives or improvements Grace and Faith Manor are taking to improve care and services to residents (and their families) and the overall work environment for staff and volunteers. A CQI board is installed at each manor, we will use the boards to keep you updated and to ensure transparency. We are in this together and we welcome your input. The board will be updated frequently, so please check them regularly. A suggestion box is also placed beside the CQI board for you to give feedback.

Dedication to Education!

With the many projects that are being carried out here at HCH, the Education Department has delivered education to residents, families, and team members, regarding Person-Centered Language, Living with Dementia Journey (LDJ), Palliative and End of Life Care, and different educational items regarding the Palliative Collaborative Project.



COVID-19 Update:



As Ontario approaches the end of respiratory illness season, the Province is updating its COVID-19 measures in Long-Term Care Homes, in consultation with the Chief Medical Officer of Health.

These changes came into effect on March 31 and include:

- An end to asymptomatic screen testing

- Residents, caregivers, and visitors, no longer are required to mask outdoors, however, staff will require a mask if they are in close proximity to residents.
- Continuation of resident screening and daily temperature check
- Removal of visitor screening
- Masks are required within the Manors

CARF International (Commission on Accreditation of Rehabilitation Facilities (CARF))



What is CARF - founded in 1966 as the Commission on Accreditation of Rehabilitation Facilities, CARF International is an independent, nonprofit organization focused on advancing the quality of services we use to meet our needs for the best possible outcomes.

HCH has submitted the application for the CARF survey to be completed in early spring 2024. It has been confirmed that the survey will be conducted in person. The teams continue to work diligently on getting HCH ready for the survey. CARF will be soliciting feedback from team members, residents, and families 30 days before the completion of the survey.

The Accreditation Committee:

Loraine Anderson

Tracy Kamino

Aleksandra Grzeszczuk

Justine Dudziak

Kamal Sekhon.

If you would like to learn more about CARF International or want to get involved please speak to the CQI and Risk Management Specialist, Loraine Anderson at extension #5322.

Health Quality Ontario (HQO) Quality Improvement Plan (QIP)

Faith and Grace Manors submitted their QIP to the HQO at the end of March 2023.

Here are the 3 areas that we are working on:

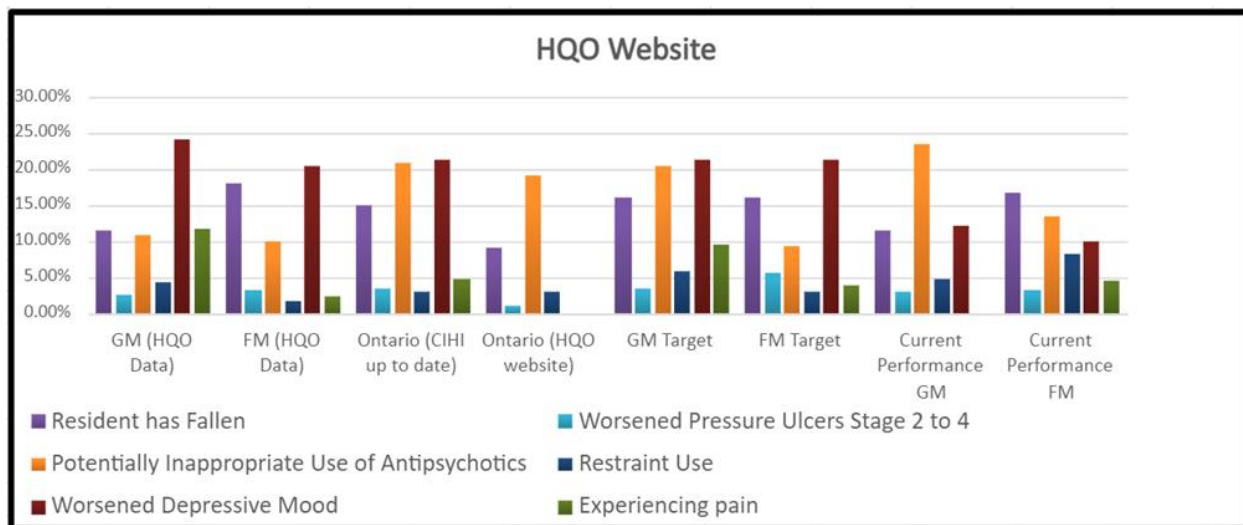
Timely and Efficient Transitions

Service Excellence

Safe and Effective Care

You can find more information regarding the QIP on the CQI board or by requesting a copy from your Administrator.

Health Quality Ontario Provincial Comparison Data April-Dec 2022



	GM Q1	GM Q2	FM Q1	FMQ2	FMQ3	GMQ3
Resident has Fallen	15.54%	9.20%	18.83%	8.55%	16.67%	11.43%
Worsened Pressure Ulcers Stage 2 to 4	2.30%	0%	3.80%	0.92%	3.17%	2.94%
Potentially Inappropriate Use of Antipsychotics	22.20%	21.95%	13%	10.53%	13.51%	23.44%
Restraint Use	8.20%	6.98%	5.40%	5.13%	8.20%	4.69%
Worsened Depressive Mood	20.22%	20%	13.08%	16.07%	10.00%	12.07%
Experiencing pain	7.78%	1.15%	3.81%	2.56%	4.55%	0.00%
Wait Times (median)						

Regulatory and Funding Inspection Results

Random inspections by the Ministry of Labour, Fire Department, and Ministry of Environment resulted in 0 orders and positive results.

Faith Manor had no non-compliance from MLTC inspections related to a complaint inspection for 2022. There were two (2) WNs and one (1) VPC.

Grace Manor had two (2) non-compliance from the MLTC inspections related to a complaint inspection. There were eight (8) WNs and four (4) VPCs.

Best Practice Spotlight Corner



We continue to collaborate with the RNAO in implementing Best Practice Guidelines (BPGs) at both Manors. At present, we have Falls, Pain, Person-Centered Care, and Palliative BPGs at the Grace Manor and all except for Pain at Faith Manor.

Falls and Falls Prevention:

We have seen a reduction in the total number of falls overall for both Manors.

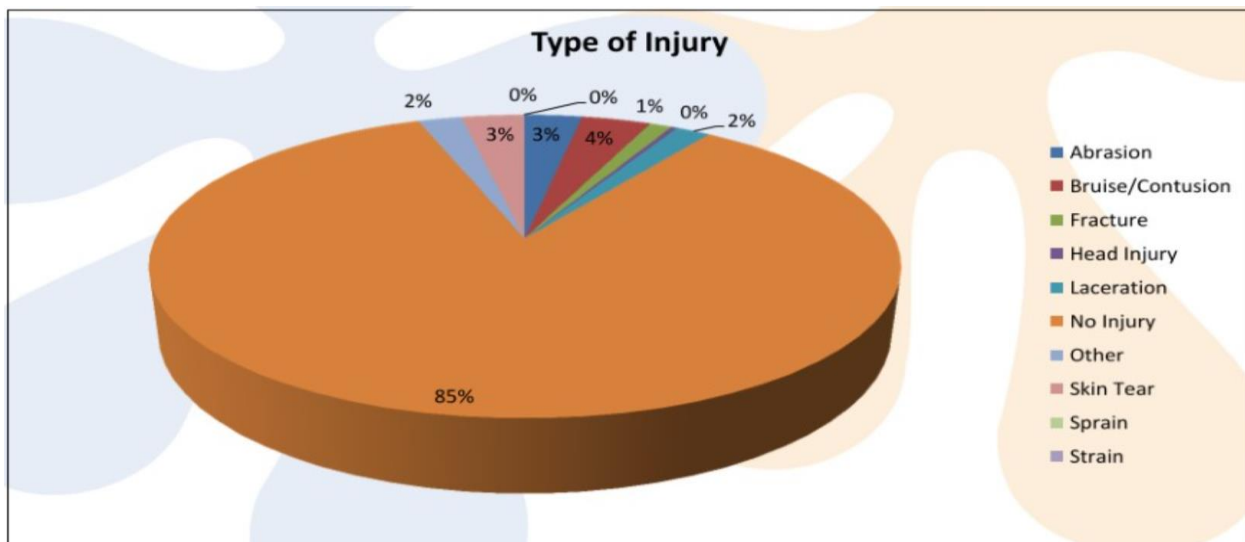
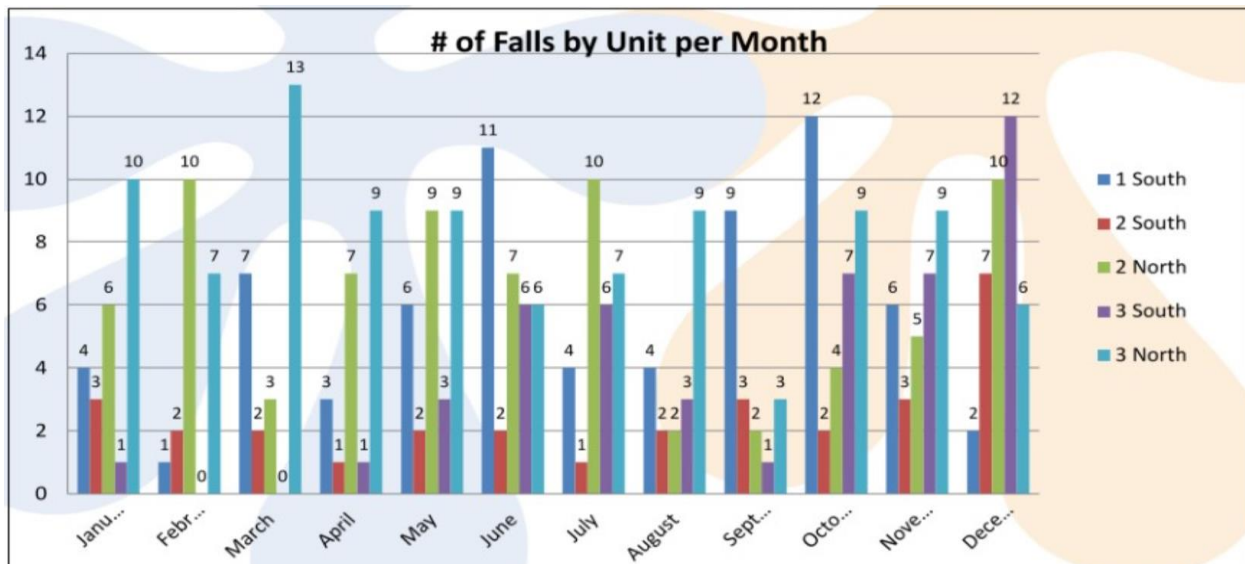
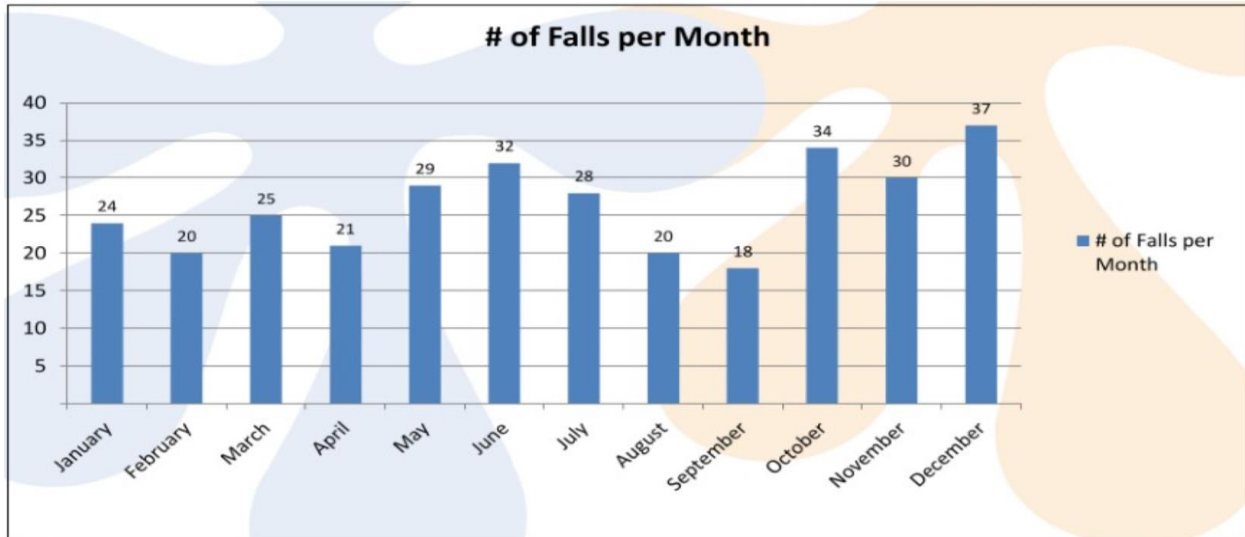
The plan is to:

- Assign Falls Champions to each unit
- Educate new staff on falls prevention
- Purchase more fall prevention equipment

Grace Manor's Falls Data 2022

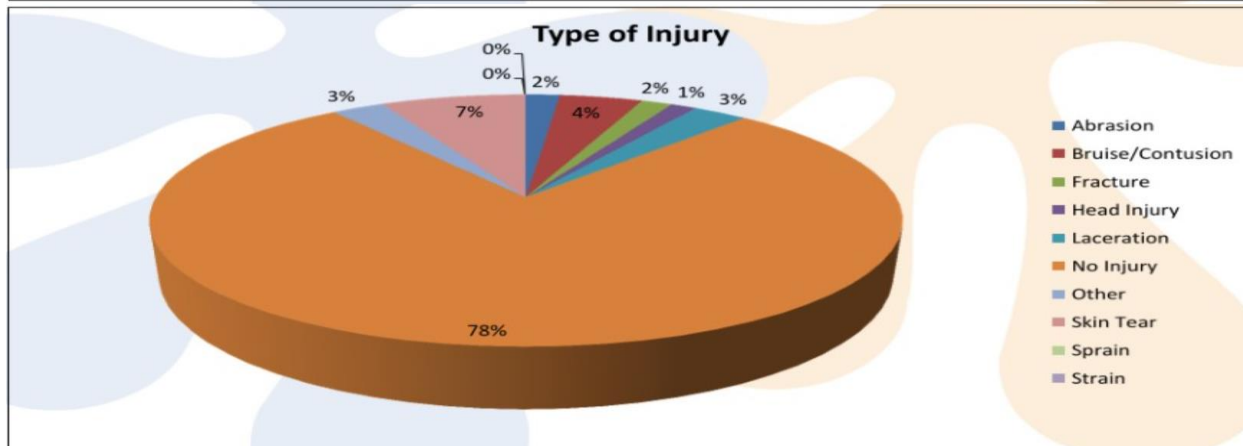
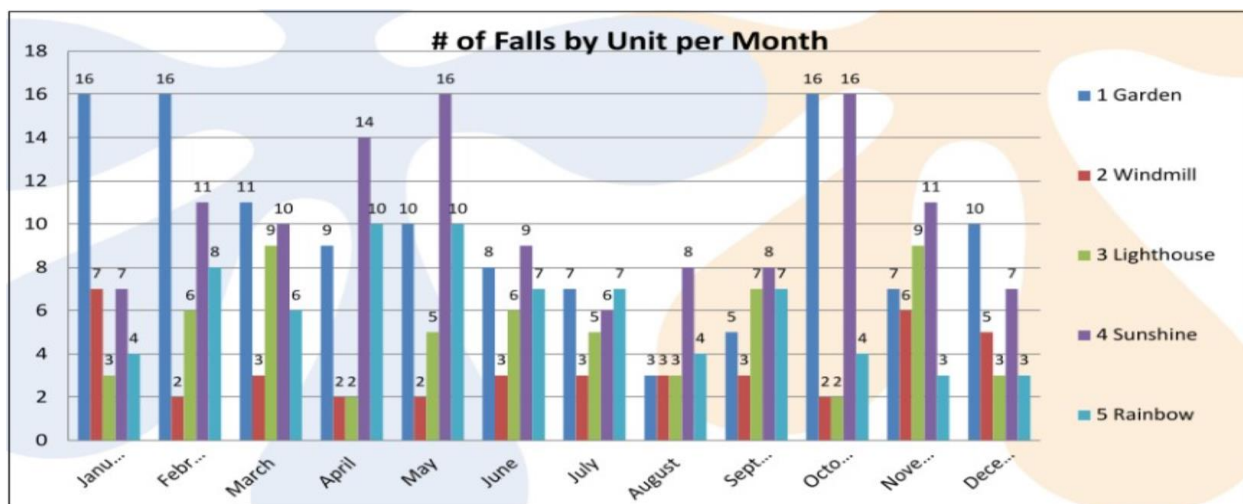
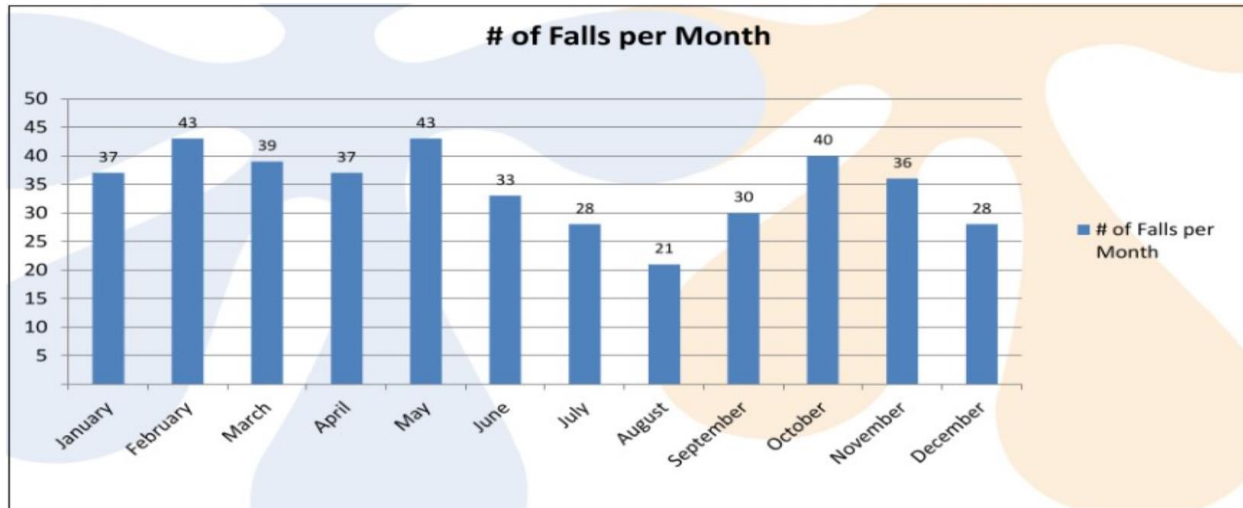
Faith Manor went from 13.83% of residents who fell in Q4 (Jan.-Mar) to 11.43% in Q3 (Nov.-Dec.). There was an approximately 25 % reduction in falls to 9.20% in Q2 (July-Sept.).

QUALITY MATTERS AT HOLLAND CHRISTIAN HOMES



Faith Manor's Falls Data 2022

Faith Manor went from 16.62% of residents who fell in Q4 (Jan.-Mar) to 16.67% in Q3 (Nov.-Dec.). There was an approximately 50% reduction in falls to 8.55% in Q2 (July-Sept.)



“Who am I” Initiative

The Grace Manor Family Council started an initiative called “Who am I”, that highlights a resident’s wishes, preferences, values, and choices and includes simple graphics.

A poster is placed on the wall of the resident’s room with specific information related to the resident.

A pre-launch survey was completed, and there was an 80% response rate. These five (5) questions were asked on the survey:

Who Am I... Sample

My name is: **Jane Doe**
 Languages Spoken: **English**
 Age: **78**
 # of Children: **4**
 Favourite Colour: **Pink**

My Spouse: **John Doe**
 My Nick Name: **Susan**
 Career: **Retired News Anchor**
 # of Grand-children: **8**
 Favourite Food: **Chicken Pot Pie**

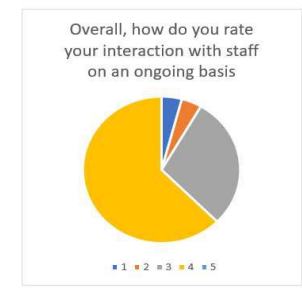
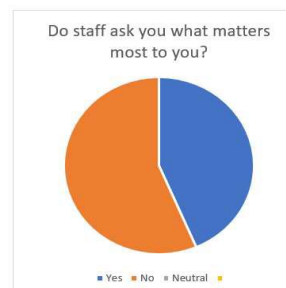
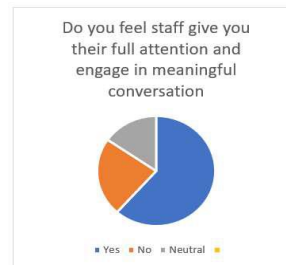
My Interests/Past Hobbies...

- Walking daily, please walk with me
- Dancing, I like to sway my arms
- Watching TV—Beverley Hillbillies, I love Lucy, Eight is Enough & Chick Flick movies (DVD's located in the top drawer. Insert the DVD at the back of the TV)
- Listening to Music— The Beatles & ABBA are my faves (CDs in the drawer— they also play in the TV)
- I used to knit often
- I loved to travel

My Care Needs...

- Please brush my teeth after every meal. I pocket my food in the upper right and left of my mouth. I don't want cavities.
- I like milk, water or coffee with milk, no sugar, no cookies.
- I need help to get in and out of my chair or bed.

- Do staff ask you how you prefer to be addressed and always address you by this name?
- Do you feel staff give you their full attention and engage in meaningful conversations with you?
- Do staff ask you what matters most to you?
- Overall, how do you rate your interactions with staff on an ongoing basis?
- Is there one thing you wish the staff would talk about with you?

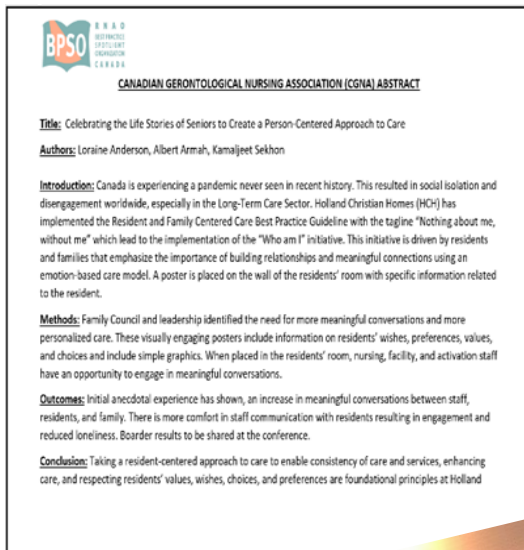


The results from the survey were shared with the Administrators of the Manors to create an action plan to address the results.

HCH was invited to present at the Canadian Gerontological Nursing Association (CGNA) conference in Niagara Falls

An abstract about the “Who Am I” initiative that started as an idea by a Grace Manor family member was submitted to the Canadian Gerontological Nursing Association (CGNA). The abstract was approved and a team from HCH presented on this initiative during the CGNA conference in Niagara Falls in April.

Gwen Veenstra (GM Family Member) Jody Clarke (Director of Programs), and, Nakita Shiwnath (Activities Staff)



HCH Presented at the BPSO-LTC Program Orientation Launch

HCH was invited to present at the BPSO-LTC Program Orientation Launch in Toronto. The theme was “Demonstrating Value and Impact of BPG Implementation”. Aleksandra Grzeszczuk, the Faith Manor Administrator represented on behalf of HCH.

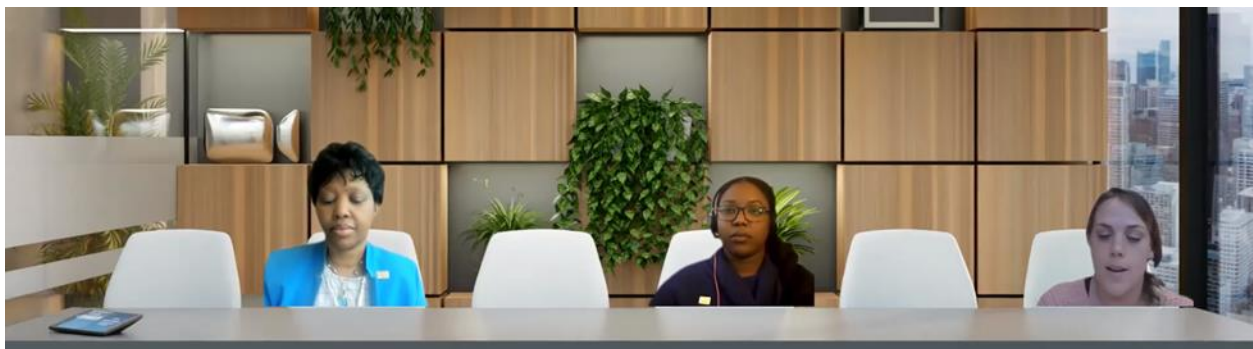
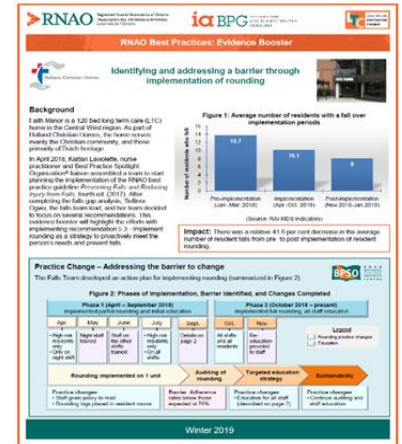


RNAO's Falls Community of Practice

HCH participated in a panel discussion with RNAO's Falls Community of Practice. The focus was on the success of the Falls BPG and Purposeful Rounding. Sellinor Ogwu represented HCH and highlighted the effectiveness of the Each One Teach One approach during the initiative's launch.

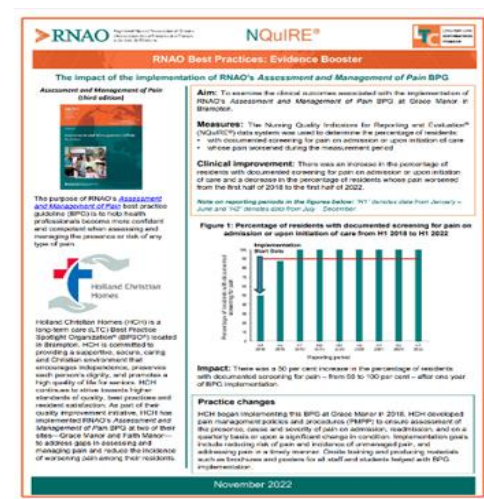
Watch the recording at

<https://rnaobox.rnao.ca/index.php/s/8cfCfFn62n3HiR7>



Assessment and Management of Pain

Through the implementation of a new reporting method in the CQI program, Grace Manor recognized that more could be done for residents who had worsening pain in the 1st quarter. The team implemented action items, including a review of all care plans, which led to a 50% decrease in the number of residents who had worsening pain from 16% to 8% in the 2nd quarter. An evidence booster was developed with the help of the RNAO and has been published on their website.



Annual Program Review Days (Grace and Faith Manors)

The Annual Program Review days were held on April 4th (GM) and April 5th (FM). We had the Board, CEO, Medical Directors, Family and Resident Councils, Department Heads, Program Leads, and frontline staff in attendance. Grace Manor met 77 of the 92 goals that were set for 2022. Faith Manor met 82 of the 90 goals that were set.

Some of the highlights for the year include: a decrease in the number of falls and worsened wounds for Faith Manor and a decrease in worsening pain and maintaining the RUG/CMI.

The Continuous Quality Improvement Report is posted on the CQI boards in FM and GM.



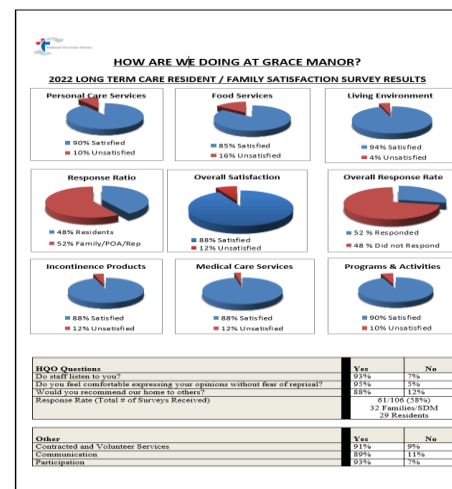
Resident / Family Annual Quality of Life Survey

The Quality of Life Survey completion started on November 15, 2022, and was distributed to 149 residents and families in Faith Manor and 106 residents and families in Grace Manor. The SDMs received the survey if the resident was deemed not competent. Surveys were returned by December 15, 2022, and results were tallied. The overall satisfaction rate was 97% for Faith Manor and 88% for Grace Manor.

Action Plans were developed with input from both Residents and Family Councils, which address such things as:

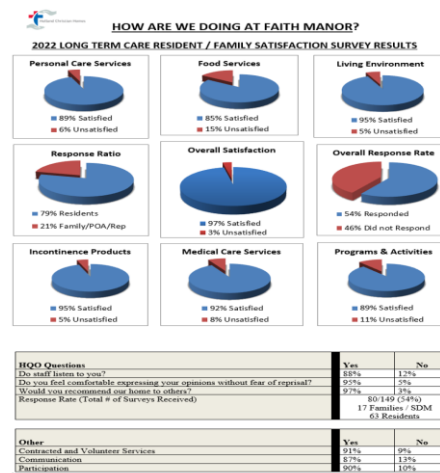
Grace Manor:

- * availability and variety of programs
- * the roles of Social Worker and Pastoral Care
- * variety of meals
- * communication skills
- * the roles of MD/NP
- * continence care education for residents and families
- * maintaining food temperatures
- * temperature of the home
- * contracted services - awareness



Faith Manor:

- * availability and variety of programs
- * attentiveness of the staff
- * food variety and temperature
- * communication skills
- * Physician attentiveness
- * quality of spiritual care
- * temperature of the home
- * NP/MD roles
- * contracted services - education



These action plans will be implemented in 2023. Results of the surveys and action plans are posted on our CQI boards both in Faith and Grace Manors.

Palliative and End-of-Life Care

Grace and Faith Manors have launched the **Collaborative Project to Sustain a Palliative Approach to Care**. The Collaborative Project was initiated, and is currently supported by, the [*Ontario Centres for Learning, Research, and Innovation \(CLRI\) in Long-Term Care, Ontario Palliative Care Network, Champlain Hospice Palliative Care Program, Regional Palliative Care Network, and Palliative Care Consultant Network*](#).

The initial self-assessment was completed in November 2022. The work plan for both Manors was completed in January 2023 and several resources were developed over the period from January to March 2023.

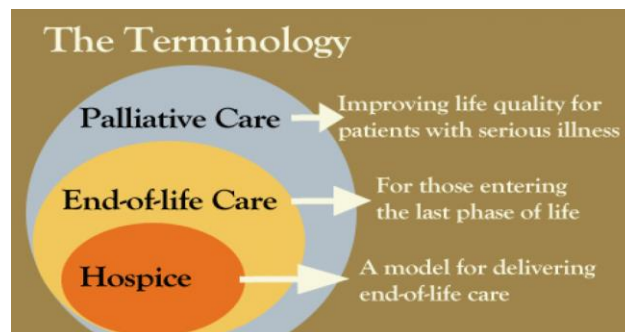
The resources include:

- Family and Carer resources for team members
- Family and staff resources
- When a loved one is dying brochures
- Grief and bereavement resources
- Process of transfer after death



There was also an opportunity to redesign the Resident/Family Satisfaction Survey to include questions regarding Palliative and End-of Life-Care.

If would like to receive any of the resources named above, please reach out to your Resident Advocate, DRC/ADRC, or Administrator.



CQI Committees and Teams

We have 16 committees, 6 Specialized Program Teams as well as an Accreditation Committee here at HCH.

Committees

- IPAC
- Accreditation
- Specialized Program
- Standards-Health Records/Privacy/IT
- Medical Advisory, Pharmacy, and Therapeutics
- Joint Staff Health and Safety and Lift
- Family Council (GM/FM)
- Resident Council/Food (GM/FM)
- Admissions
- Emergency Preparedness
- Social and Wellness
- CQI and Risk Management
- Ethics
- Education
- Resident as Partners (RAP)



Specialized Programs Teams

- Falls Prevention
- Pain Management
- Behaviour Management
- Continence Care and Bowel Management
- Skin and Wound Management
- PASD/Restraints and Bed Safety



These teams meet regularly to ensure that the care that is provided to our residents is of the highest quality and to give families a sense that their loved ones are in an environment that is committed to a high level of care. The work of these teams also provides employees with the knowledge that they work in a safe and supportive environment.

We are always looking for volunteers to join our committees. Please feel free to reach out to the Administrator of your Home for more information on how to be a part of this important work.

Let's Improve and Let's Celebrate

Let's Improve
% of restraints usage is well above the provincial average and trending up since last quarter. (New admissions to both Homes and isolation protocols due to COVID-19 are the contributing factors.)
% of falls above the provincial average, however, been trending down since last quarter (Contributing Factors: move to the new building, very spacious, isolation precautions, new admissions)
Let's Celebrate
% of skin/wounds well below the provincial average
% of residents with worsening pain was reduced by 50%
0 residents sent out on Form 1
Continues to be designated as an RNAO BPSO
Resident as Partners Committee has been launched
Muriel Project ongoing
MOL visited FM on March 16th, but no orders
Implemented Palliative and End of Life BPG
All Registered Staff trained on the Palliative and the End of Life Clinical Support Tool
Onboarded x5 summer students for Grace Manor for 16 weeks
Nursing Week/Staff Appreciation BBQ
Celebrated Delirium Awareness Month.



“Gratitude unlocks the fullness of life. It turns what we have into enough, and more. It turns denial into acceptance, chaos into order, confusion into clarity...Gratitude makes sense of our past, brings peace for today, and creates a vision for tomorrow.” – Melodie Beattie

Philippians 4:6-7

"Do not be anxious about anything, but in everything by prayer and supplication with thanksgiving let your requests be made known to God. And the peace of God, which surpasses all understanding, will guard your hearts and your minds in Christ Jesus."

As always, we encourage residents, families, staff, and volunteers to provide us with feedback and suggestions to improve resident care and the work environment.

If you would like more information on our CQI Program or would like to add something to our newsletter, please call Loraine Anderson, CQI & Risk Mitigation Specialist at ext. # 5322 or email at loraine.anderson@hch.ca