

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 6, 2023

OVERVIEW

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Grace Manor is part of a larger continuum of care organization, Holland Christian Homes which is located in the City of Brampton, and includes another Long Term Care Home (Faith Manor) and six apartment towers. The mandate of Grace Manor is to provide a supportive, caring, quality Christian environment in order to preserve the dignity and enhance the quality of life for people who require long term care from a team of qualified caregivers. In partnership with residents, caregivers and families, we provide a safe, professional and caring community for seniors based on traditional Christian values, offering a continuum of care and support while respecting their individuality and dignity. Our Quality Improvement Program includes in its scope, the annual development, implementation, monitoring, review and evaluation of the following activities: Resident and Family Satisfaction Surveys, Accreditation Canada Assessment, Results and Action Plans; Staff Satisfaction Survey and Action Plan; Department Goals/Audits/stats tracking; Funding Agreements, Funding Indicators And Grants; Formal Program Reviews; Advocacy Initiatives (Resident And Family Engagement) – Residents Council, Family Council, Dining Room Committee, Internal Concern Resolution Process; Legislative Requirements / Inspection Reports And Findings; Education And Training.

The complexity of care needs of our long-term care residents have increased significantly and are being admitted to our home with increasing frailty, more complex medical issues and increased behavioral issues. The majority of our residents have some form of Alzheimer's or dementia and almost all need help with feeding, bathing, toileting and getting in and out of bed. These increased acuity levels; along with the high level of expectation of residents

and families is a challenge when compared to the funding received to meet these needs. Holland Christian Homes recognized this as a top priority for resident quality of life and a redeveloped a new built Faith Manor with an opening date of July 15 2021 which provides a modern, open-space, environment where residents have the freedom to explore their surroundings.

Our 2022/2023 Quality Improvement Plan will focus on timely and efficient transitions and safe and effective care. The established priorities, targets, and activities will take into consideration how we can best improve resident quality outcomes and safety through the reduction of falls (through implementing the RNAO best practice guideline on purposeful rounding) and to further reduce unnecessary ED visits / hospitalizations through implementing POET (Prevention of Error Based Transfers)

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

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In June 2020 Grace Manor was formally recognized as a Best Practice

Spotlight Organization through the Registered Nurses Association of Ontario, and commended on work in implementing RNAO best practices of Abuse and Neglect, Falls Prevention Management through implementing purposeful rounding, and Pain Management. Faith Manor continues it's title as a Best Practice Spotlight Organization and has also implemented best practice guidelines for person-centered care and palliative care/ end of life.

Faith Manor enhanced their quality assurance platform for Infection Prevention and Control audits by purchasing Speedy Audits through Handy Metrics to provide detailed analysis of hand hygiene compliance rates, as well as utilizing GoAudits in assisting with the

analysis and trending of all Infection Prevention and Control, Environmental Cleaning audits. This enhanced auditing functionality has improved the organizations risk mitigation outcomes with tailored reports and analyses of infection prevention and control metrics.

Grace Manor enhanced their quality informatics platform in Point Click Care to assist in the enhancement of the quality improvement program and risk mitigation processes. Point Click Care analytics provides improved decision making with real-time actionable data, allows for guided workflows and detailed resident profiling, enhances root cause analysis capabilities, and provides intuitive data visualization and trending information that spearheads transformative processes to deliver continuous quality improvement within Holland Christian Homes. Grace Manor's CQI/ Risk mitigation program will benefit from this software capability as it aides in the identification of the homes highest acuity population as well as identifies which residents are triggering negative outcomes, which enables the organization to take immediate action and minimize risk. This program aides Holland Christian Homes in the completion of detailed root-cause analysis and the preparation of quality improvement plans to enhance performance outcomes and to improve the quality of care provided to our seniors.

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

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Holland Christian Homes is committed to operating our long term care homes with transparency and accountability. We support and encourage ways that provide opportunities for residents and families to stay engaged in all aspects of the home. Our poster

called, “Your Voice Counts” lets residents and families know how they can get involved and share in the management of our home and create a voice for all residents at Grace Manor. Residents and Families are also able to complete CQI suggestion forms and/or concern forms.

Residents participate in our Dining Room Committee and Residents Council. Families participate in Family Council. There is a designated staff assistant to ensure these councils are easily able to meet and have their meetings documented. The leadership team is made aware of concerns, complaints and comments and there is immediate follow-up by Leadership/Administration. Residents and families also participate in our annual program reviews and evaluations. An annual Resident Satisfaction Survey was completed by competent residents (with or without impartial assistants) and POAs for care for residents who are not mentally capable to complete them.

In January 2022, we conducted our 2021 annual program evaluation day in which we reported on and evaluated 31 programs and set goals for those programs to be completed in 2021. Staff, CEO, managers, board members, family and resident council representatives, a pastor, and residents all participate in this evaluation day. It was a great opportunity for everyone to share in the successes and to learn more about how we will work to improve in the areas needing improvement. Families and residents were very appreciative of being invited to participate and commented about how much they learned from participation in this day and appreciated the transparency that our home was providing. We are proud of our many partnerships, all of which support integration and continuity of care. Our partnership with Central West Local Health integration Network (CWLHIN) & Ontario Health Team ensures LTC applications are processed in a timely manner to avoid

any placement delays. Many education and training initiatives which are critical to the success of our Quality Improvement Plan would not be possible without our partnerships with BSO, PSHSA (staff safety), the Regional Infection Control Network, the RGP Program, Wound Care and mobility specialists, and our many contracted service providers (ie. dental, foot-care pharmacy, physiotherapy, banking, hairdresser etc). Our memberships with AdvantAGE and OLTCa are beneficial to support our advocacy and improvement initiatives.

Leadership team members sit at various sector table groups ensuring we are informed of current trends and changes in the healthcare system affecting our home and resident care. We are part of the network of LTC homes in Ontario with access to provincial Electronic Health Record assets (i.e Reach portal). We are also accredited through Accreditation Canada which provides knowledge and systems experience across many long-term care facilities.

The Grace Manor leadership team and staff are engaged in an organizational wide (Holland Christian Homes) quality improvement program. We have developed many programs which are interdisciplinary through committees, evaluations, huddles, and communication methods such as audits, reports, in-services and feedback forms. These programs and initiatives are coordinated through our CQI Program Coordinator who compiles the results in the form of reports which provide feedback and direction for future initiatives.

All volunteers and employees of Holland Christian Homes are expected to participate in ongoing and systematic quality improvement efforts through quality assessment activities, such as annual staff satisfaction surveys, specialized program review meetings, infection control surveillance, utilization management,

and medical record review.

Our interdisciplinary specialized program teams look at particular issues to identify opportunities to improve processes and outcomes through the establishment of goals. Goals are acted upon, monitored, reported at and evaluated by the applicable in-house team and/or department(s). Front line staff and even residents and families are often engaged through this process. The medical staff at Holland Christian Homes participates in independent medical record review; infection control; pharmacy and therapeutics review; medical advisory review, mortality review; ethical issue reviews, utilization management, review of transfers to other facilities; and will serve, from time to time, as liaisons to the CQI Committee and any sub-committees as needed. Holland Christian Homes has been very strong proponents of providing as much care as possible without transferring or admitting residents to hospital. We have enhanced our ability to do this through several initiatives. Our full-time Nurse Practitioner that works in both of our Manors has enabled us to provide treatments and diagnosis for our residents to prevent the need to transfer to hospital. When a resident is admitted to hospital, the NP is able to coordinate and facilitate a faster discharge by ensuring care is available upon their return home. In addition, our NP provides training to our registered staff to increase their ability to do critical thinking and increase their skills within their scope of practice. Our Quality Improvement Plan ensures that these partnerships /networking continue as a priority indicator.

Resident and family feedback through the Councils, the Survey, concerns and suggestions, care conferences, and their participation in our program reviews and evaluations have been instrumental in at least three of our Work plan submissions. One under the Theme I: Timely and Efficient Transitions includes the “Number of ED visits

...” is related to the reported bad experiences of families and residents who have been transferred to ED. The other two under the Theme II: Service Excellence includes “Percentage of residents responding positively to ‘What number would you use to rate how well the staff listen to you?’” and “Percentage of residents who responded positively to the statement ‘I can express my opinion without fear of consequences’ and Theme III, Safe and Effective care, includes “Percentage of residents who fell in last 30 days”.

PROVIDER EXPERIENCE

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Holland Christian Homes (HCH) tagline of being "Here to Care" sets the foundation of our community that we are serving on a daytoday basis. Our community consists of our vulnerable seniors that resident in the manors, our families, stakeholders, and our dedicated staff that help us fulfill our mission.

Holland Christian Homes believes that the organizational health and wellness are important to each individual employee. Individual health may affects the ability of employee's contribution to meet the mission and values of HCH. To promote a positive and healthy culture in the workplace, HCH has organized a dedicated Workplace Social and Wellness Committee. This committee will plan and execute social events to help HCH promote a culture of engagement, belonging and fun among all HCH employees. HCH values the opinions and suggestions of staff for improving the work environment while enhancing resident care at Holland Christian Homes. In addition to the Workplace Social and Wellness Committee, HCH invites all staff to be a voluntary member of 12 additional committees that steer the organization's goals and objectives to enhance the quality of care we provide to enhance the resident experience. We believe that including staff members as members of these committees brings an important perspective, allowing their voice to be heard, as key members of the HCH family. Holland Christian Homes partners with an Employee and Family Assistance Program that provides onsite counseling support and shares important resources to staff such as: Highlighting Resilience: Bouncing back from Burnout, Coping with Anxiety, Adjusting after the Pandemic Response, Feeling Safe and Engaged, Fostering Trust and Commitment.

WORKPLACE VIOLENCE PREVENTION

Commitment to Zero Tolerance of Workplace Violence

Holland Christian Homes is committed to upholding the violence prevention program to ensure a safe and healthy environment for all employees as well as for residents, families, volunteers and visitors. Our workplace violence program provides policies, procedures and education related to the assessment, prevention and management of workplace violence.

Violent behaviour at Holland Christian Homes is unacceptable from anyone. Violence includes any actual, attempted or threatened conduct or action that gives a person reason to believe or feel that he/she or another person is at risk or causes them to feel unsafe. Violence can include actual or attempted assault; sexual assault; physical attacks; threats; aggressive behaviour; threatening gestures or body language; abuse including verbal, psychological and sexual abuse; workplace bullying and harassment; and domestic violence that enters into the workplace.

The management of Holland Christian Homes recognizes the potential for violence in the workplace and therefore makes every reasonable effort to identify all potential sources of violence to eliminate or minimize these risks through the Workplace Violence Prevention Program. Holland Christian Homes refuses to tolerate any type of workplace violence, within the workplace or at work-related activities, and fosters conditions of respect and cooperation where there is zero tolerance of violence in the workplace. All individuals and groups must share the common goal of elimination or reduction of workplace violence from all sources. Holland Christian Homes will not tolerate behaviour from anyone that

intimidates, threatens, harasses, abuses, injuries or otherwise victimizes our employees and others and we will take whatever steps are appropriate to protect our employees and others from the potential hazards associated with workplace violence

A workplace free from violence is everyone's responsibility. Every person in Holland Christian Homes must support this program by working in compliance with the law and our policy expectations including reporting any situation of violence or potential violence to their Department Head or to Human resources so that the situation can be investigated and corrected. Through this cooperation, Holland Christian Homes will continue to be a safe and respectful environment for everyone. Management pledges to investigate and deal with all reported incidents and complaints of workplace violence in a fair and timely manner, respecting the privacy of all concerned as much as possible.

PATIENT SAFETY

RESIDENT SAFETY PLAN

Senior management is committed to guiding the execution of the Long-Term Care Resident Safety Plan across all the Holland Christian Homes Long Term Care homes and Seniors Services programs.

Our mission is to provide effective, high-quality, safe and efficient long-term care services in a home-like setting. Our purpose is to ensure our residents feel safe while in our homes. This Resident Safety Plan will drive continuous improvement to quality and safety throughout our Long-Term Care homes and Seniors Services programs, and builds upon our mission, vision and values.

The Long Term Care Resident Safety Plan is developed in conjunction with the Accreditation Canada Patient Safety Goals within the patient safety areas of culture, work life/workforce, communication, medication use, infection control, falls prevention, and risk management, and their required organizational practices (R.O.P.s). The R.O.P.s are essential practices that our organization must have in place to enhance resident/client safety and to minimize risk.

This document articulates the go forward strategy for quality and safety at the Holland Christian Homes Long Term Care Homes and Seniors Services Programs. Strong multi- disciplinary experience, quality improvement practices, collaboration, and Leadership throughout our programs, services and departments will foster attention to continuous quality improvement and drive improved performance in quality and safety for Residents, families, staff and our community.

The Resident Safety Plan is readily available to all residents, families and staff. The Plan is reviewed and updated annually as required.

HEALTH EQUITY

All managers and board members who participate in the hiring of employees and volunteers shall adhere to the provisions of the Ontario Human Rights Code. This policy is based on the Ontario Human Rights legislation and recognizes the inherent dignity and worth of every person and ensures equal rights without discrimination.

1. Job advertisements will not make reference directly or indirectly to race, ancestry, place of origin, colour, ethnic origin, citizenship, creed, sex, sexual orientation, age, religion, record of offences, marital status, same-sex partnership status, family status or handicap.
2. Further, job advertisements shall not specifically require Canadian experience but shall outline the specific skills required that are reasonable, genuine and directly related to the job.
3. Candidates will only be asked if they are legally entitled to work in Canada rather than any questions about their ethnicity or background.

CONTACT INFORMATION/DESIGNATED LEAD

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Justine Dudziak Administrator justine.dudziak@hch.ca
905.463.7002 ext. 5255

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 31, 2023**

Lisa Alcia, Board Chair / Licensee or delegate

Justine Dudziak, Administrator /Executive Director

Loraine Anderson, Quality Committee Chair or delegate

Tracy Kamino, Other leadership as appropriate
