Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 19, 2024



OVERVIEW

Extendicare Maple View is a 256-bed long-term care home located in Sault Ste. Marie, ON

Our Mission

Extendicare is a leading seniors' health care organization serving the needs of Canadians for more than 50 years. Across our organization, our dedicated team members are united by our mission of helping people live better.

Improving Care, Every Day

At Extendicare, improving the quality of care we provide to our residents and their families guides all we do. We are committed to continuous improvement, and on an ongoing basis, we seek new ways to evolve our practices and strengthen our services.

We are focused on a national, multi-year plan to improve the care we provide across every home we operate, and in every community we serve.

Read more in our Improving Care Plan.

Quality Improvement

Extendicare's Quality Framework outlines the ways in which our home is supported to achieve success in all aspects of quality with a focus on quality of life, safety, compliance, and resident satisfaction. Extendicare's homes in Ontario are responsible for driving their quality improvement plan. We work closely with dedicated, regional clinical consultants who provide ongoing support to homes in our home's quality initiatives. Our strategic

direction and the initiatives that support the plan also meet or exceed standards set by Accreditation Canada and meet the requirements of our LSAA.

Our home's Continuous Quality Improvement (CQI) Committee uses the CQI Framework in alignment with Extendicare's enterprise-wide strategic quality priorities to identify priority areas for quality improvement in our home, make recommendations, monitor, and measure progress, identify, and implement adjustments, and communicate improvement outcomes for the current and following year. Results are shared with residents, families, team members and external partners to support our priorities, targets, and activities.

On an organization-wide basis, Extendicare measures and monitors our quality initiatives using data accuracy and quality indicator score cards. Home-level quality reports are circulated monthly and reviewed by homes and regional teams, to help monitor progress and drive meaningful conversation at each home's continuous quality committee meetings. Performance monitoring is a key part of driving our performance and includes but is not limited to the following:

- Monitoring key quality indicators
- Internal audits
- External audits
- Program evaluations
- Resident Satisfaction Survey results

Active priority areas for quality improvement in our home are:

1. Falls prevention – 15%

Our Approach – Risk mitigation strategies that assist in preventing falls include robust assessments to identify history of falls, contributing factors (such as pain, toileting needs, confusion/dementia, change in medication, etc.) to create an individualized plan of care with interventions that are unique to that resident. Assessments include but not limited to, head-to-toe assessments, fall risk assessments, transfer & mobility assessments, and environmental risk assessments of residents' room. Conducting

post-fall huddles is considered an integral component of a fall-riskreduction program. Staff who participate in post-fall huddles are likely to have positive perceptions of teamwork support for fall-risk reduction and safety culture because huddles are a team-based approach to reporting, adapting, and learning. We have a falling leaf program that identifies a resident who has been assessed as a high risk for falls by posting a leaf at the room door and on adaptive devices to alert all staff in home that the resident is a high risk for falls. The home also has fall prevention equipment such as fall mats, hip protectors, anti-slip socks, proper footwear, medication reviews by Physician, NP (Nurse Practitioners) and/or Pharmacy consultant, bed and chair alarms, chair cushions to prevent sliding, and individualized mobility aids. Finally, we have a Falls Reduction team that is interdisciplinary and includes but not limited to, the Nurse Practitioner/Attending Physician, Physiotherapist/Occupational therapist, Restorative care nursing team, falls lead, dietitian, program staff and care staff.

2. Inappropriate Use of Antipsychotics – 17.3%

Our Approach – The home has a strong ARI (Antipsychotic Reduction Initiative) team that has engagement from our BSO (Behavioural Supports Ontario) lead, our pharmacy consultant, our Medical Director/attending Physician, Nurse Practitioner, nursing staff, etc. that monitors the use of antipsychotics in the home to provide recommendations to safety and slowly reduce antipsychotic use if warranted. The team meets regularly to closely monitor all residents prescribed an antipsychotic. The BSO lead begins assessing any resident being admitted the initial review upon

admission. This allows the BSO lead/team to begin gathering information from their medical history (CMAI, Cornell score,

PAINAD scores) and begin the reduction if appropriate. Front line staff involved to document any changes in behaviour of resident. If no changes/positive changes, we continued to reduce antipsychotics as per pharmacist/prescriber recommendation (standard is 25% reduction every 2 weeks)

2. Restraint Reduction – 2.5%

Our Approach – Our Restraint Reduction program has an interdisciplinary team that focuses on ensuring the home is following Extendicare's Least Restraint policy with a strong focus on teaching residents and families that we do not want to use restraints and the alternatives that are offered. The discussion of restraint use begins at the time of reviewing applications and having discussions as required to prepare for the admission with the goal to remove the restraint over time.

4. Worsened Stage 2-4 Pressure Injury – 2%

Our Approach – Our Home, in partnership with our vendors, provides an enhanced Skin & Wound Prevention program that provides an assessment process that ensures correct product selection to promote healing, education of new advanced practice skin and wound care nurses, implementation of turning clocks, review of bed surfaces and repositioning devices. The Home has will soon be implementing a new assessment tool that measures the moisture in the heels and sacrum (scans moisture under the skin) to identify potential pressure ulcers before they develop, and interventions are put in place to prevent the ulcer from developing.

ACCESS AND FLOW

Extendicare is committed to working closely with our community partners including our regional Home and Community Care Support

Services team, hospitals, and business partners to ensure safe and effective care of residents across the organization and at the local home level. We do this through ongoing relationship building and partnerships with health system partners such as local long-term care homes, regional IPAC (Infection Prevention and Control) hubs, Ontario Health teams and various regulatory authorities. In addition, our partnerships extend to our Medical Advisor and Attending Physicians as we work to improve medication management, clinical care and reduce unnecessary ED visits. We strive for excellence through our focus on quality and safety and opportunities with our partners to participate in research. The success of this QIP (Quality Improvement Plan) requires collaboration with multiple partners, including Behavioural Supports Ontario, Health Force Ontario, Ontario Association Resident Councils, Home and Community Support Services, Ontario Long Term Care Association, research partners, vendors such as Medical Mart, 3M, and Medisystem pharmacy, hospitals, and other sectors.

The Home's partnership with the Behavioural Support Ontario (BSO) program promotes the assessment and recommendation for caring for residents who have complex behavioural health needs. This begins with having a full-time BSO nurse in-house who is our liaison to other resources that BSO provides. BSO provides outreach teams to assist in implementing plans of care to complex resident cases, provides transitional support to ensure continuity of care among all health care sectors, provides education to residents, staff, and families, and provides short and long-term stays at their specialized units for further assessment and recommendations. Our BSO nurse also leads our ARI (Antipsychotic Reduction Initiative) team and reviews and provides recommendations for residents who are experiencing responsive behaviours. The BSO nurse works closely

with our Medical Director/Attending Physician, Nurse Practitioner and Pharmacist.

Our Home also partners with OARC (Ontario Association of Resident's Council) and utilizes their resources to provide a quality Resident Council, to provide education to the residents, staff, and families and to provide tools and resources to conduct quality Resident Council meetings for our residents. This partnership allows our residents to have a strong voice and provides the tools to express this clearly.

Our Home values being a strong learning facility that collaborates with many educational institutions, such as local high schools for coop experience, and colleges and universities for preceptorships. We have a partnership with our local college for students to complete their practical portion of their course at our Home. Our staff assist the college by providing preceptors in the Home to provide this education to their students. We have had success in this partnership as it allows the students to experience work in LTC and gives the Home the opportunity to hire motivated students who have demonstrated the desire and work ethics required to work in LTC. We partner with other colleges and universities when required not only for Nursing but also for Programs, Dietary and Restorative Care.

The Home's partnership with Public Health Ontario and our local Health Unit is strong, notably during the COVID-19 pandemic in delivering and providing education and recommendations through the rapid changes that LTC experienced during this time. Support was provided to prepare for the pandemic, to provide education during the pandemic and to keep the Home well informed of the status of pandemic. There is also a strong collaboration between our IPAC Manager and our local Health Unit representatives in managing our vaccine program, our outbreaks, our infections

overall and is a member of our Infection Prevention and Control

EQUITY AND INDIGENOUS HEALTH

Extendicare is committed to incorporating an equity lens into all our quality improvement initiatives. We offer materials in several languages, and our focus on QI initiatives to improve care includes vulnerable populations.

Each home develops a cultural competency and diversity plan that addresses how it will respond to the diversity of its stakeholders as well as how the knowledge, skills, and behaviors will enable personnel to work effectively cross culturally by understanding, appreciating, and respecting differences and similarities in beliefs, values, and practices within and between cultures. For example, we have many homes with strong French, Chinese, East Asian and Italian communities.

In developing a cultural competency and diversity plan, our organization looks at the diversity of its community, internal and external stakeholders, and potential changes in demographics to be proactive in education, training and service delivery.

The Home has reached to community partners and have participated with Indigenous Cultural Sensitivity 4-hour training sessions for some of the leadership team and staff. We have started a collaborative relationship with the Algoma University School of Social Work professors to continue with education and training. We are currently planning the service of an indigenous Elder in the future for our indigenous residents and families within the Home. i.e., Indigenous family and their loved one would be provided with assisting with conflicts and addressing other cultural traditions in the home environment. Currently, there are plans to start with a learning /talking circle with approx. up to 15 staff participants' spring of 2024. The Elder would facilitate the circle experience. The

Elder will embody cultural values, humility, and a commitment to living what she will teach.

The theme is about the learning circle; implementation of the circle to mediate disputes etc.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Extendicare's mission is" Helping People Live Better" and we accomplish this by actively engaging our residents and families. We promote transparency with residents and families by requesting their feedback in various activities such as quality improvement projects, annual resident satisfaction surveys which we use to gauge our quality improvement measures, various committees, resident and family councils and town hall meetings. Our ongoing goal is to incorporate feedback to continually improve quality of life and safety by ensuring the care each resident receives is reflective of their individual needs and wishes.

Extendicare Maple View's Resident and Family Experience Survey Results:

- Date of Surveys: September 11 October 31, 2023
- Resident: 93.1% participated Family: 22.5% participation

Resident: Would you recommend this home? (88.4%)

- Top three areas for improvement from survey:
- 1. I have friends in the home (71.3%)
- 2. I am updated regularly about any changes in my home (72.4%)
- 3. Overall, I am satisfied with communication from home leadership (75.4%)

Family: Would you recommend this home? (94.1%)

• Top three areas for improvement from survey are regarding the

same area and will be addressed as one indicator in workplan.

- 1. There is a good choice of continence care products (56%)
- 2. Continence care products fit properly (70.4%)
- 3. Overall, I am satisfied with the continence care products (75%)

Role of Resident and Family council and CQI committee in determining actions taken with survey results: They are active participants with any improvements made within the home. They are our customers and we discuss with them and provide opportunity for input into decisions.

How results were communicated to residents and families, Resident and Family council and staff including dates: Family council is March 21, 2024. Resident council meeting is March 28, 2024. copy of the results will be circulated prior to the meeting and discussion of the results will take place during the meeting, followed by their recommendation for improvement. The results are posted in the elevators, designated communication boards - for transparency among residents, families and visitors. Final Action Plan will be posted by the end of April 2024

Date copy of the report was provided to Resident and Family councils: Will be provided at meetings March 2024.

PROVIDER EXPERIENCE

Extendicare Maple View is part of a large organization in which there are many opportunities to engage with staff and leadership in sharing quality improvement goals and commitments. This is achieved through bench marking, using experiences of other homes to share best practices, annual quality and strategic planning conferences and participation in the Ontario Long Term Care Association Quality Committee and annual quality forums. Our annual employee engagement survey provides an opportunity for team members to give their feedback on various issues such as staff satisfaction, innovation, and work environment.

SAFETY

Despite the best efforts of healthcare professionals, adverse events sometimes happen in healthcare settings. Adverse events can be devastating for resdients and healthcare providers who are part of or witness these events. When a resident experiences an unanticipated outcome or a medical error occurs, there is an expectation that the healthcare establishment will deal with the event openly and honestly and that the parties involved will accept responsibility, express empathy, and work to prevent the event from happening in the future.

We document, track and trend resident Adverse Events so that we can apply lessons learned from these events and minimize the risk of them happening again. One of the most important aspects of good event management is creating a work environment where all employees, residents and their families feel they can speak up and report issues, concerns and even mistakes. Extendicare is committed to creating a "just" organization culture. This culture:

- Encourages openness and frankness in identifying and reporting Adverse Events
- Focuses on interdisciplinary learning and an organizational commitment to applying lessons learned.
- Fosters an environment that promotes safe behaviour choices.
- Supports disclosure where appropriate.

Incidents that provide an opportunity for improvement are shared with team members through town halls, daily huddles, and regular meetings/committees to increase awareness and seek feedback to understand root cause so that strategies put in place are effective. Practice alerts are sent out by the Corporate Quality and Risk team to all homes following a serious incident or near miss to ensure awareness and review of process.

POPULATION HEALTH APPROACH

Extendicare Maple View's population is the geriatric population who have chronic disease requiring 24-hour nursing care with a large portion having a form of dementia. There is also a growing population of younger residents with mental health diagnoses that require 24-hour nursing care, such as Down's syndrome and other developmental disabilities. The home is also equipped to provide care to bariatric residents.

CONTACT INFORMATION/DESIGNATED LEAD

Administrator: Barb Harten BHarten@extendicare.com

OTHER

Administrator: Barb Harten

CQI Committee Chair: Barb Harten Quality Lead of Home: Barb Harten Regional Director: Johanna Horne Corporate Quality: Erin Coreno

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 18, 2024

Erin Coreno

Board Chair / Licensee or delegate

Barb Harten

Administrator /Executive Director

Barb Harten

Quality Committee Chair or delegate

Johanna Horne

Other leadership as appropriate