

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 19, 2024

## OVERVIEW

Extendicare Bayview is a 202 bed long-term care home located in Toronto (Bayview Woods-Steeles).

### 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

## 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 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.

Home Specific Partnerships:

The success of this QIP requires collaboration with multiple partners, including

North York General Hospital-education with staff on any nursing interventions.

Behavioral Support of Ontario-Psychogeriatric Resource Consultant (PRC) Education

Achieva Health/Physiotherapist- training on safe lifting and transfers, resource to help assess, evaluate, and plan on reducing

falls, usage of restraints, and pain management.

Arjo - education to staff on slings and transfers.

Medisystem pharmacy – review medication to reduce the falls and collaborate with help to reduce the usage of antipsychotic medications

Home Medical Equipment (HME) - provide assistive devices to reduce development of pressure ulcers, use of restraints, pain management of comfort.

Home and Community Care Service Central - provides potential resident information prior to admission

Geriatric Mental Health Outreach Team - support with the Home, residents, and families to manage responsive behavior, reduce the usage of antipsychotic medications and pain management

Nurse-Led Outreach (NLOT) - North York General Hospital (NYGH) resource to educate, assess, treat, and prevent infections, wound care, and prevent emergency department visits.

Enterostomal (ET) Nurse – helps in providing the best product for the resident's wound type.

Solventum – provide staff education on wound care products

First Quality – provide staff education on pericare and incontinent product application.

## **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.

## **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.

Our 2023 Resident and Family Experience Survey Results:

Date of Surveys: September 11-October 31, 2023

Resident: 19/22

Family: 42/140

Resident: Would you recommend this home? Result: 89.5 %

Top three areas for improvement from survey:

1. I am satisfied with the relevance of recreation programs: 50%
2. I am satisfied with the variety of spiritual care services: 55.6%
3. I am satisfied with the food and beverages served to me: 68.4%

Family: Would you recommend this home? Result: 83.3 %

Top three areas for improvement from survey:

1. The resident has input into the recreation programs available: 25%
2. I am satisfied with the variety of spiritual care services: 48%
3. Continence care products are comfortable: 66.7%

Key actions taken, as a result of survey outcomes for top 3 areas for resident satisfaction and family satisfaction:

On February 12th, the Resident Council Meeting was held.

Top 3 areas: Relevance of recreation programs, variety of Spiritual care services and comfort in continence care products.

-Need to collect information from residents on what their needs and wants are and try to implement programs and spiritual care based on their preferences.

-Collect information by April 30th, 2024

-Implement by August 31st, 2024

Role of Resident and Family Councils and CQI Committee in determining actions taken with survey results:

-Previous documentation from Resident Council Meeting Minutes and individual meeting minutes

-Use All About Me, Personhood Summary, Behavioral Support Assessment information for resident's needs and wants.

-Resident involvement in programs discussed in Team Care Conference.

- Review progress on action items at future council meetings 2024. Results were communicated to the residents & families, Resident & Family Council, and staff:

Family Council Meeting was held on March 9th, July 6th, October 17th, and December 5th, 2023.

General Staff Meeting held on October 27th, 2023.

Date copy of the report was provided to Resident and Family councils:

Family Council Meeting on February 8th, 2024. Resident Council Feb 12, 2024

## PROVIDER EXPERIENCE

Extendicare Bayview 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.

Special project: SSO PCC

## SAFETY

Despite the best efforts of healthcare professionals, adverse events sometimes happen in healthcare settings. Adverse events can be devastating for patients 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 Bayview population consists of mainly long-term care residents.

We have put culturally appropriate food, multicultural staff to communicate with residents, and culturally specific events in place to ensure that we meet the needs of these populations. We also work with North York General Hospital (NYGH) to reduce the number of emergency room visits.

## CONTACT INFORMATION/DESIGNATED LEAD

Executive Director/Administrator: Danielle Zhang

CQI Committee Chair: Danielle Zhang

Quality Lead of home: Yelim Lee

Regional Director: Niklas Chandrabalan

Corporate Quality: Erin Coreno

## OTHER

Fall awareness month. Restorative activities to build independence. Tovertafel used to keep residents engaged instead of using antipsychotics.

## 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 13, 2024**

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**Erin Coreno**, Board Chair / Licensee or delegate

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**Danielle Zhang**, Administrator /Executive Director

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**Yelim Lee**, Quality Committee Chair or delegate

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**Niklas Chandrabalan**, Other leadership as appropriate

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