

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 2, 2024

OVERVIEW

Extendicare Blenheim Community Village is a fifty-seven bed long-term care home located in Blenheim, Ontario.

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 – Within our home we prepare and run weekly clinical meetings that review and discuss our residents who are deemed a high risk for falls and we take a deep dive into the residents that have experienced a fall in the previous week. We review residents' basic needs are being met such as the toileting schedule, using their mobility devices appropriately, etc. We initiated a trial for at risk residents increasing their safety rounds where hourly checks are completed and we ensure the residents 4 P's (positioning, pain, potty or toileting and personal items) are met. Risk assessments are completed of the environment at the time of falls. FIRM interventions (hip pants, chair alarm, bed alarm, floor mats, grip socks, hi/lo bed, motion fall prevention lighting) and care plans are personalized to suit the needs of our residents.

2. Inappropriate Use of Antipsychotics – 17.3%

· Our Approach – We are currently working on a deprescribing program and are working closely with the pharmacy and physician. Different residents are reviewed monthly and as needed. We utilize internal and external resources such as BSO/GMHOT to review the residents who experience behaviours that require the use of psychotropic medications. Our goal is to minimize use as much as possible and to ensure that we are using non-pharmacological interventions first. We are encouraging an increase in participation with activities to improve stimulation and engagement.

2. Restraint Reduction – 2.5%

- Our Approach – Currently we are not utilizing any restraints in the home. We provide education and health teaching to family and residents at the time of admission and as needed. Education is provided to staff during onboarding, annually, and as needed.

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

- Our Approach – Within our home we utilize our Wound Care Champion, physician, NLOT team, Motion Specialties and external partners such as the wound care specialist at the local hospital and a 3M representative. We reach out to our vendors if education is required on certain new products and education is provided to the residents and families as needed. Onboarding education and annual education is provided to clinical staff with advanced education provided when available.

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 Home and Community Support Services, Behavioural Supports Ontario, Antipsychotic Task Force, Ontario Association Resident Councils, Ontario Long Term Care Association, research partners, and vendors such as Medline, 3M, and Medisystem pharmacy, hospitals, other sectors.

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: Resident & Family: September 11 to October 31, 2023
- Resident: Would you recommend this home? Result: 75%
- Resident's top three areas for improvement from survey:
 1. Overall, I am satisfied with the meal, beverage and dining services: 43.8%
 2. I am satisfied with the quality of care from dietitians: 57.1%
 3. Overall, I am satisfied with the recreation and spiritual care services: 68.8%
- Family: Would you recommend this home? Result: 100%
- Families top three areas for improvement from survey:
 1. The resident enjoys meals in the dining room: 50%
 2. Maintenance of the physical building and outdoors space is improving: 50%
 3. Overall, I am satisfied with the meal, beverage and dining services: 66.7%
- Key actions taken, as a result of survey outcomes, for the top three areas for resident satisfaction and family satisfaction:
 1. Increase the number of residents who were satisfied with their meal, beverage, and dining services - September 2024
 2. Increase the number, variety and time of recreation activities - July 2024
 3. Improve the ambiance of the home to create a more welcome environment – July 2024
- Various residents and family members were chosen to participate in the development and review of the actions plans for 2024 responding to the 2023 survey results. Our quality committee approved the actions plans prior to implementation. In April, results and actions coming from the home's action plans will be communicated to residents at the home's Resident Council, with a copy posted in the home, and on our website. Family members will

be provided a copy by mail and an open house information session will be held early spring to present the plan.

PROVIDER EXPERIENCE

Blenheim Community Village 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 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 Blenheim Community Village population consists of mainly elderly persons from the greater Chatham-Kent area with a significant population of individuals from the Blenheim area.

CONTACT INFORMATION/DESIGNATED LEAD

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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 26, 2024**

Wendy Gilmour, Board Chair / Licensee or delegate

Glen Norton, Administrator /Executive Director

Shelly Andrews, Quality Committee Chair or delegate

Other leadership as appropriate
