

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 19, 2024

OVERVIEW

Overview

Extendicare Southwood Lakes is a 150 long-term care home located in Windsor, 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 is to decrease environmental risk by way of assessments, ensure a safe and uncluttered environment with adequate lighting and supportive mobility devices, appropriate footwear, medication reviews.
- Our Falls Committee meets weekly and take to the floor for staff feedback to ensure there is a collaborative and interdisciplinary approach.
- Safety checks "Fall Prevention Rounds" will be implemented at the start and end of every shift, as these 2 main issues have been identified as contributing factors for falls.
 1. Toileting
 2. Falls during shift change/report
 - Staff Arriving: Prior to receiving report, staff will conduct "Fall Prevention Rounds" by starting with our high-risk falling leaf residents. Staff will ensure these residents care needs are met. They will then return to call bell panel to receive report from the RPN.
 - Staff Departing: "Fall Prevention Rounds" Staff will utilize the last 30mins of their shift, ensuring residents have had their care needs met and are safe.
- All shift change reports are to be conducted where the call bell panel is visible should a call bell go off.
- RPN's will be responsible for ensuring staff conduct "Fall Prevention Rounds" and report any issues with the process to management.
- The expected outcome will be a decrease in falls by the end of 2nd quarter.
- 2. Inappropriate Use of Antipsychotics – 17.3%
- Our Approach is the engagement of pharmacy team to provide

recommendations to prescribers for safe reduction of antipsychotics, engaging the Charge Nurse and Behavioural support leads to work with team to support behavior management. This approach has been noted to be effective as we continue to maintain at 8.83% in this area well below the corporate expectation.

2. Restraint Reduction – 2.5%

- Our Approach is continued implementation of Extendicare’s Least Restraint policy, utilization of alternatives to restraints, discussions with families/residents about risks of restraint use and available alternatives. This approach has been noted to be effective as we continue to maintain a 0% in this area.

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

- Our Approach is to continue working in partnership with our vendors to enhance our assessment process and ensure 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.
- RPN’s will be re-trained to ensure that they have a sound understanding of the implementation of treatments and intervention. This will be done in conjunction with our community partners and internal training.
- RPN’s will understand the expectations of wound care interventions and will be held accountable if the expectations are not met.
- PSW’s will be re-trained on their roles in preventing skin tears and

conducting skin assessments.

- RN’s will be expected to conduct monthly audits.
- The expected outcome will be decrease in worsening Stage 2-4 pressure injuries by the end of the 2nd quarter.

ACCESS AND FLOW

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 - assisting in providing us with the right information to ensure a smooth transition into LTC for the resident and the home.
- Behavioural Supports Ontario - Providing tools and resources internally and externally to assist our residents with responsive behaviours.
- Ontario Association Resident Councils - Provide support and

education to ensure the residents understand their rights and have a productive resident council.

- Ontario Long Term Care Association – Continuing to keep us updated and provide tools and resources

Vendors such as:

- Medical Mart - falls equipment and other medical supplies.
- 3M - skin wound and product
- Medisystem pharmacy - medication reviews for falls and antipsychotics
- Hospitals
- Motion specialties - mobility devices, skin and wound prevention devices, and protective devices.

EQUITY AND INDIGENOUS HEALTH

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

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 For both residents and families.

Resident: Would you recommend this home? Result: 54.2 %

- Top three areas for improvement from survey:

1. If I need help right away, I can get it (30.4%)
2. I have a good choice of continence products. (32.4%)
3. Overall, I am satisfied with the recreation and spiritual care services. (45.9)

- Family: Would you recommend this home? Result: 49.3%

- Top three areas for improvement from survey:

1. The resident has input into the recreation programs available. (28.0%)
2. I am satisfied with the timing and schedule of spiritual care services. (31.0%)
3. I have the opportunity to provide input on food and beverage options. (32.2%)

Action Plan: RESIDENTS

- If I need help right away, I can get it (30.4%)
 - a. Improving communication with residents
 - b. Increase safety rounds through the shifts and make ourselves visible.
 - c. Improve customer service responses.
 - d. Ensure staff break are taken separately, ensuring there is a minimum 2 staff on the floor at all times.
- I have a good choice of continence products. (32.4%)

- a. Ask Prevail to provide education for all staff.

- b. More rounding/toileting

- c. Continue to report product complaints to ensure cooperate is aware of any product issues.

- Overall, I am satisfied with the recreation and spiritual care services. (45.9%)

- a. Educate residents concerning IPAC protocol.

- b. Encouraging residents to give staff suggestions on activities and spiritual services.

- c. Attempt to re-start volunteer program in the home.

Action Plan: Families

1. The resident has input into the recreation programs available. (28.0%)

- Offer the opportunity to have the Program Manager make a presentation to the Family Council on how the Programs Team operates and how they encourage the residents to voice their desires for activities and how it is discussed at every Resident Council meeting.
- Have a “Did you know” area added to the monthly newsletter indicating some of the activities the residents asked for during the resident meeting and what we are doing to make the suggestions a reality. As the March 2024 newsletters are already printed, we will be adding this information in the email for families, residents, and friends on March 1, 2024. Going forward it will be added to the monthly newsletter itself.
- Ensure families are aware as to where they can find resident council meeting minutes in the home. This has also been added to the newsletter and will continue to be listed going forward.

3. I am satisfied with the timing and schedule of spiritual care services. (31.0%)

- Ask the families council for their suggestions.
- Educate families as to why spiritual services are scheduled at these times.
- Create a survey tasks force to get more information and truly understand why this rated so low.

3. I have the opportunity to provide input on food and beverage options. (32.2%)

- Dietary Manager made a presentation to family council (post survey) on January 17, 2024, concerning the dietary department and its functions. In this meeting, the Dietary Manager discussed the Resident Food Council and the residents ability to make suggestions and how those suggestions are put into effect.
- Have the food suggestions and when those suggestions will be served, added to the monthly newsletter. This is starting March 1, 2024
- Ensure families are aware of where they can find food council meeting minutes in the home. This has been added as a standing item on the newsletter.
- Family council was provided a copy of the Survey results: February 26, 2024, via email to the Family Council president. An offer to review the results with the family council was made by the Administrator. An invitation has yet to be received by the Administrator.
- Resident Council president was provided with a copy of the Survey results: February 27, 2024. The Administrator was invited to

resident council March 5, 2024 and will review the results with resident council at that time.

PROVIDER EXPERIENCE

Provider Experience

Extendicare Southwood Lakes 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

Resident 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. Extencicare 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

Population Health Approach

Extencicare Southwood Lakes population consists of mainly 65years and older adults, however we are seeing an increase in middle aged adults. Our home provides specialty programs such as:

- Physiotherapy
- Behavioral Services Ontario
- Falls program
- Skin and wound program,
- Montessori based programing
- IPAC program
- Resident and Family councils.

CONTACT INFORMATION/DESIGNATED LEAD

Contact Information/Designated Quality Lead

Madeleine Desilets, Administrator and Vivian Wehbe, Director of Care

OTHER

Sign-off

Executive Director/Administrator: Madeleine Desilets

CQI Committee Chair(s): Madeleine Desilets and Vivian Wehbe

Quality Lead of home: Madeleine Desilets

Regional Director: Anthony McKenzie

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 19, 2024**

Erin Coreno

Board Chair / Licensee or delegate

Madeleine Desilets

Administrator /Executive Director

Madeleine Desilets

Quality Committee Chair or delegate

Anthony McKenzie

Other leadership as appropriate
