

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

April 2, 2024

## OVERVIEW

Extendicare Hillside Manor is a 64-bed long-term care home located in Stratford 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 Extencicare'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, Extencicare 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 including scheduled toileting plan that are individualized for the resident, environmental risk assessments to ensure a safe and uncluttered environment with adequate lighting and supportive mobility devices, post fall huddles to identify root causes in order to reduce future falls, activity programs specific to the needs of residents at high risk for falls such as Dementiability, appropriate footwear, medication reviews

#### 2. Inappropriate Use of Antipsychotics – 17.3%

- Our Approach – Direct engagement of the physicians and pharmacy team to provide recommendations for safe reduction of antipsychotics; implementation of the Extencicare Antipsychotic Reduction Decision Support Tool, engaging Behavioral Support Ontario in home leads to work with clinical team to support behavior management for newly admitted residents on previously prescribed antipsychotics in order to find opportunities for reduction.

#### 2. Restraint Reduction – 2.5%

- Our Approach –Implementation of Extencicare's Least Restraint policy, utilization of alternatives to restraints, discussions and education with families/residents about risks of restraint use and available alternatives

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

- Our Approach –Working in partnership with our vendor 3M to enhance our assessment process and ensure correct product

selection to promote healing, education of new advanced practice skin and wound care nurses including participation in the 3M Academy, and annual education specific to wounds and skin care; adherence to audits and root cause analysis for all newly occurring wounds and skin impairments; review of bed surfaces and repositioning devices.

## **ACCESS AND FLOW**

Extencicare 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 Achieva Health, Medline Pharmacy and Ontario Home Health all of whom are active quarterly participants in our homes Professional Advisory Committee. Behavioral Supports Ontario regional support team which provides education and support for responsive behaviors along with consultation to our Geriatric Seniors Mental Support systems and vendors such as Medline, 3M who provide resources for the most up to date supplies.

## **EQUITY AND INDIGENOUS HEALTH**

Extencicare 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**

Extencicare'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:

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ate of Surveys: September 11 to October 31, 2023

Resident surveys: 31 Family surveys: 28

- Resident: Would you recommend this home? Result: 88.9%  
Top three opportunities for improvement from the resident survey:  
I am satisfied with the temperature of my food and beverages 47.2%.  
I have input into the recreation programs available 48.3%.  
Staff take the time to chat with me 58.3%
- Family: Would you recommend this home? Result: 85.7%  
Top three opportunities for improvement from the family survey:  
The resident has input into the Recreation programs available 35.3%.  
I have an opportunity to provide input on food and beverage options 45.5%.  
I am satisfied with the variety of spiritual care services 52.6%.  
Survey results are reviewed and shared through our strategic planning process to determine annual and 3-year plan goals. This process flows through our regular meetings of our Quality Council, which also reviews quarterly year end clinical indicators versus benchmark and extends to our Residents' Council and Family Information sessions to determine required priorities.  
Survey results were reviewed, and a copy of the survey report will be provided to the Residents' Council at their next monthly meeting, held March 25th, 2024. The home has an active family council and survey result summaries will be shared with Families at the next Family Council meeting on March 12th, 2024.  
Action plans for top areas for improvement will be developed based on feedback from residents and families, quality council and the QIP

process. To be finalized by April 30, 2024, and fully incorporated into the strategic plan.

## PROVIDER EXPERIENCE

Hillside Manor 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. Hillside Manor is a teaching home with strong linkages to colleges and universities offering full placement and precepting for PSW, RPN, RN programs.

## 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 behavior 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 Hillside Manor population consists of mainly complex medical needs and dementia. We have put a Behavior Support team (BSO) in place to ensure that we meet the needs of these populations. We also work with our regional BSO partners and local Seniors mental health support services.

## CONTACT INFORMATION/DESIGNATED LEAD

Executive Director/Administrator: Shannon Balasso

CQI Committee Chair: Shannon Balasso

Quality Lead of home: Marta Andrekovic Director of Care

Regional Director: Helen Lyons

Corporate Quality: Kim Penner

## 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 27, 2024**

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**Wendy Gilmour**, Board Chair / Licensee or delegate

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**Shannon Balasso**, Administrator /Executive Director

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**Marta Andrekovic**, Quality Committee Chair or delegate

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Other leadership as appropriate

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