

Continuous Quality Improvement - Interim Report

Designated Lead Carrie Acton Administrator

Quality Priorities for 2022/2023

Fairvern is pleased to share its 2022/23 Quality Improvement Plan. As of June 30, 2022, Fairvern transitioned from a not-for-profit home to a municipal home when ownership was assumed by the District of Muskoka. This transition will bring new resources and expertise to further aid in bringing quality care to those we serve. Fairvern's belief statements reflect our focus on quality including safety first and foremost; integrity and accountability; and teamwork and partnerships. COVID-19 has challenged our home in many ways and 2022/23 will be a year to refocus. This will include a refresh of our Quality Programs including education and promotion to increase participation of Residents, Staff and Families.

Quality Objectives for 2022/2023

1. Reduce the number of ED visits for a modified list of ambulatory care sensitive conditions from 15.24 to 12.
2. Determine baseline for percentage for Residents who responded positively to the statement: "I can express my opinion without fear of consequences."
3. Reduce the percentage of residents on antipsychotics without a diagnosis of psychosis from 50% to 40%.

Quality Improvement Planning Cycle and Priority Setting

Fairvern has developed QIPs as part of the annual planning cycle since 2015. These plans were submitted to Health Quality Ontario each April. Historically, Fairvern has started planning for quality improvement priorities in September. The following areas are used to identify quality priorities:

- Issues identified internally (critical incidents, concerns) and/or externally
- Provincial improvement priorities (HQO)
- Staff, Family, and Resident experience survey results and comments
- Performance data from Canadian Institute for Health Information (CIHI)
- Progress achieved in recent years
- Input from stakeholders both internal and external

Identified priorities are shared at various forums. These include the leadership team, Resident Council, Family Council, Staff Meetings, and the Board of Directors. Final approval of the QIP is completed by the Quality Committee and the Board of Directors.

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Policies, Procedures and Protocols

Quality care is at the forefront of decision making at Fairvern. An interdisciplinary Quality Council, Including Residents and Families utilizes the Model for Improvement to determine quality improvement actions.

- Diagnose the Problem
 - QI methodologies including process mapping, 5 whys and fishbone are used to identify root causes of issue and opportunities for improvement.
- Set Improvement Aims
 - Ensuring a base understanding of the issue and an understanding of the importance from a resident perspective is the first step. Once this is complete an improvement aim is identified. Fairvern creates SMART aim statements – Specific, Measurable, Attainable, Relevant and Timely.
- Develop and Test Change Ideas
 - Quality Council develops various change ideas that will assist in meeting the goals of the AIM statement.
 - Plan Do Study Act (PDSA) cycles are used to test change ideas through small tests of change. PDSAs provide opportunity to revise and refine change ideas prior to implementation.
- Implement, Spread and Sustain
 - Change management plans consider the following factors:
 - Education required to support implementation
 - Identifying Change Champions
 - Communication required to stakeholders, both during and after implementation
 - Work to be completed prior to implementation

At this stage, key project measures will be determined to identify if changes implemented resulted in improvement. These include the following measures:

Outcome

- Measures the AIM

Process

- Measures key activities, tasks, and processes implemented to achieve the AIM.

Balancing

- Measures other parts of the system that may be unintentionally impacted by changes



A sustainability plan is developed before the implementation. This plan identifies different strategies the team will use to evaluate and address both short term and long term sustainability of the changes.

Process to Monitor and Measure Progress, Identify and Implement Adjustments and Communicate Outcomes

Collecting and monitoring key project measures over time is a key component of the sustainability of the plan. Analysis of the outcome measures are used to identify if the home is achieving the desired outcomes. If desired outcomes are not being achieved, the process measure can be reviewed over time to either confirm compliance with change ideas or identify gaps in compliance that need to be addressed. Alternative change ideas may be considered based on the results of the analysis. The team may also consider offering coaching to staff to enhance compliance.

Communication is the key to success. Communication strategies employed by Fairvern include:

- Creation of a Quality Corner Board
- Publishing stories in the newsletter
- Email to Staff, Families, and Residents
- Presentations to Resident Council, Family Council, Staff Meetings and Family Townhalls
- Weekly huddles with staff

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