

Continuous Quality Improvement- Interim Report

Designated Lead Jennifer Ridgley, RN BScN Administrator

QUALITY PRIORITIES FOR 2022/23

The Pines Long Term Care 2022/23 Quality Improvement Plan (QIP) reflects the ongoing commitment to quality in our mission statement “Optimizing life with excellent care, compassion, and comforts of home”.

In 2021, The Pines strategic plan was refreshed with a focus on the next four (4) years. Ongoing changes in the Long-Term Care (LTC) sector will affect the day-to-day operations and the future direction of The Pines LTC Home as we recover from the COVID-19 pandemic. The Pines also aligned its strategic plan Corporate plan of The District Municipality of Muskoka to ensure that goals, values, and visions are of a common focus. The core values of the long-term strategy remain relevant and are reflected in the refreshed plan which outlines strategic goals and key deliverables for 2022 – 2025.

The Pines Strategic Plan goals:

- Deliver Exceptional Person-Centered Care
- Maintain a Full Staff Compliment
- Healthy Vibrant Staff
- Efficient Operations
- Build Relationships

The QIP is a roadmap to supporting the achieving the goals in the strategic plan while navigating challenges and opportunities. The QIP is based on the Quadruple Aim framework adopted by Ontario Health.

QUALITY IMPROVEMENT PLAN OBJECTIVES FOR 2022/23

1. Reducing the percentage of LTC residents without psychosis who were given antipsychotic medications preceding their resident assessment.
2. Reduce the number of avoidable ED visits for residents in the home.
3. Reduce unplanned ED visits in the last 30 days of life among palliative care patients.
4. Increase the percentage of residents who responded positively to the annual resident survey to the statement: “I can express my opinion without fear of consequences”.

HEALTH SERVICES DEPARTMENT

Long-Term Care Services

70 Pine Street, Bracebridge, ON P1L 1N3
Phone: 705-645-2100 Toll-Free: 1-800-461-4210 (within 705)
Fax: 705-645-5319
Email: healthservices@muskoka.on.ca
Website: www.muskoka.on.ca

THE PINES

Long-Term Care Home

98 Pine Street, Bracebridge, ON P1L 1N5
Tel: 705-645-4488
Fax: 705-645-6857



5. Increase the percentage of residents responding positively to the annual resident survey to: “I feel comfortable speaking up about concerns about my care and/or my home.”

QIP PLANNING PROCESS

The Pines Long-Term Care Home has developed QIPs as part of the annual planning cycle since 2015, with QIPs submitted to Health Quality Ontario (HQO). The Pines QIP planning includes an evaluation of the factors to identify possible priorities:

- progress achieved in recent years as well as with the Continuous Quality Improvement Committee.
- ongoing analysis of performance data from the Canadian Institute for Health Information (CIHI);
- resident and family Satisfaction Survey results.
- emergent issues identified internally (complaints and/or critical incidents) and/or externally (MLTC, MOH).
- feedback and/or input from residents, families, employees, leadership team members, Residents’ Council, Family Council, and external partners, including the MLTC.
- mandated provincial improvement priorities (e.g., HQO, MLTC)

Priorities are presented and discussed at various forums to validate and identify additional priorities that may have been missed. These forums include the leadership team, Continuous Quality Improvement Committee, Residents’ Council, Family Council, and the District Municipality of Muskoka Health Services Committee.

APPROACH TO CQI

The Pines Nursing and Operational policies and procedures, combined with practice standards, provide a baseline for employees in providing exceptional quality care and service.

1. Diagnose/Analyze the Problem, Utilizing Operational Reliability & Strategic Plan

The team uses various QI methodologies (including Operational Reliability and the 2022-2025 Strategic Plan) to understand some of the root causes of the problem, bigger picture improvements, and identify opportunities for improvement. This work is an analysis of relevant data and the completion of gap analysis against relevant Best Practice Guidelines as well as utilizing the practices from Operational Reliability with a shift in thinking to a risk-based approach to managing systems in the workplace.

2. Set Improvement Goals

Once the team has a better understanding of the current priorities, including the understanding of strategic directions and priorities staff aim to improve as well as focus

on quality resident care, and overall improvement goals are identified. The goals will be used to evaluate the impact of the changes through implementation and sustainability. The team develops aim statements that are Specific, Measurable, Attainable, Relevant, and Time-Bound (SMART) with the residents' best interests and quality care in mind.

3. Develop and Test Change Ideas

With a better understanding of the current system, the team identifies various change ideas that move toward meeting the goals set out for the year. This work uses Operational Reliability with a shift in thinking to a risk-based approach to managing systems in the workplace. Once the review has been complete through the operational reliability lens, staff look to employees for further feedback and understanding of the concerns and problems to better plan the change ideas. The focus is on processes versus employee behaviour.

Plan-Do-Study-Act (PDSA) cycles are used to test change ideas. PDSAs provide an opportunity for the team to refine change ideas and build confidence in the solution prior to implementation. Change ideas typically undergo several PDSA cycles before implementation.

4. Implement, Engage, and Sustain

The team considers the following factors when developing a strong work plan:

- Outstanding work to be completed prior to implementation which includes seeking feedback and working through PDSA cycles.
- Education required to support implementation, including key employees to engage.
- Communication is required among various stakeholders, both before during, and after implementation.
- Engaging the entire home in change to ensure it is sustained into the future.

Staff assess key measures to ensure the change is effective and sustained into the future by assessing outcomes by measuring key activities, tasks, and processes implemented to achieve goals.

MONITOR AND MEASURE PROGRESS AND COMMUNICATE OUTCOMES

A key component of a sustainable plan is the collection and monitoring of the measures over time. Collecting the data and displaying it in a meaningful way is important. Analysis of the Outcome measures will be used to determine if the Home is achieving the desired outcomes or not. If not achieving desired outcomes, the team can review gaps in to be addressed or change ideas that need to be reviewed or adjusted. Based on the results of this analysis, the team may consider alternative change ideas, and provide coaching or support to employees to enhance engagement. Looking to employees to understand what the gaps or difficulties are key.

It is important to communicate and celebrate successes. Communication strategies are tailored to the specific improvement initiative.

These include:

- Sharing progress with the District Health Services Committee as the Home's Committee of Management
- Publishing stories and results on the family portal, and newsletter
- Email communication to staff, families, and other stakeholders
- Presentations at monthly Family Meeting, Residents' Council, Family Council, CQI Committee, and The District of Muskoka Health Services Committee
- Resident Home Area Meetings with employees
- Leaders through departmental meetings.