2023/24 Quality Improvement Plan
"Improvement Targets and Initiatives"

LONG TERM CARE UNIT

Niagara Health System 1200 Fourth Ave, St. Catharines , ON, L2S0A9

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M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) A= Additional (do not select if you are not working on this indicator) C = Custom (add any other indicators you are working on)

Issue	Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
Theme II: Service Excellence	**Patient-centred**	Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?"	P	% / LTC home residents	Completion of the Annual Resident Survey and Seperate Family Survey April 2023	51585*	85.07	90.00	Maintain current target.	Use of volunteers or non-biased individuals to assist residents as need to complete the survey. Multidisciplinary Resident Care Committee including ECU and ILTC family and residents	Development of a resident focused annual survey	Working with the newly developed Quality Improvement Committee within the LTCH we will redeveloped the Long Term Care Annual Survey to understand the voice of residents living in the home and guide the development of quality care.	Percentage of residents that complete the Resident Based Annual Survey.	We are aiming to have 90% of residents in the LTCH with a Cognitive Performance Scale (CPS) of 3 or less complete the annual Resident Satisfaction Survey by May 2023	LTCH will work with non-biased external partners to assist residents as needed and afford them the opportunity to feel confident in completing the survey. Residents with a CPS of 4 or more do not have the cognitive ability to complete the survey.
											Development of a family focused annual survey	Working with the newly developed Quality Improvement Committee within the LTCH we will redeveloped the Long Term Care Annual Survey so that the voices of family members are heard and guide the development of quality care within the home when resident is not capable	Percentage of family member that complete Family Based Annual Survey.	We are aiming to increase our current family survey response rate by 25% from the 33% response rate obtained in 2022, by May 2023	LTCH will develop a separate annual survey to be sent out to all family members in the home to allow them to have a voice within the home.
											Develop a Multidisciplinary Resident Care Committee	The LTCH will develop a Multidisciplinary Resident Care Committee that meets monthly and that will allow for family/resident voices to be a part of decision making to enhance and promote resident centrered care within the LTCH.	Percentage of residents that complete the Resident Based Annual Survey.	We are aiming to have 90% of the residents responding positively to the survey question "how well do staff listen to me" by May 2023	Multidisciplinary Team will include members of the care team and Family and Resident Representatives from ECU and ILTC home areas.
		Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences".	P	% / LTC home residents	Completion of the Annual Resident and Family Survey April 2023	51585*	86.36	90.00	Maintain current target.	Use of vounteers or non-baised individuals to assist residents as need to complete the survey. Multidisciplinary Resident Care Committee including ECU and ILTC family and residents	Development of a resident focused annual survey	Working with the newly developed Quality Improvement Committee within the LTCH we will redeveloped the Long Term Care Annual Survey to understand the voice of residents living in the home and guide the development of quality care.	Percentage of residents that complete the Resident Based Annual Survey.	We are aiming to have 90% of residents in the LTCH with a Cognitive Performance Scale (CPS) of 3 or less complete the annual Resident Satisfaction Survey by May 2023	LTCH will work with non-biased external partners to assist residents as needed and afford them the opportunity to feel confident in completing the survey. Residents with a CPS of 4 or more do not have the cognitive ability to complete the survey.
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Theme III: Safe and Effective Care	**Effective**	Percentage of LTC residents experiencing worsened pain	C	% / Residents	CIHI CCRS / October 2022 - September 2023	51585*	10.93	9.51	Maintain current target.	Hospice Niagara Pain and Palliative Care Consultant, Behavioural Support Ontario Team, Pyschogeriatric Regional Consultant.	Development of required program committee that focused on resident pain	Through the development of a multi-disciplinary team approach the LTCH will discuss monthly contributing factors to resident worsening pain and quality care strategies for reduction.	Monthly multi-disciplinary team meeting will be held.	We are aiming to have 12 mutli-disciplinary meetings in 2023 to review the Rai-MDS Quality Indicators for Pain and use of PRN pain medication as needed for the resident.	
											Use of Rai-MDS data on worsening pain to bring identified residents to the Pain Committee	Using resident specific identifying data from Montthly Rai-MDS Quality Indicators available in Point Click Care to drive decision making around providing quality care options to reduce worsening pain for residents in the home.	Monthly Rai-MDS data will be pulled to support resident focus care decisions regarding their experience with pain.	We are aiming to review 100% of resident that are experiencing pain and worsening pain, care plans at the monthly Multi-disciplinary meetings in 2023.	
											Registered staff in the home will be provided with training regarding identification of and the use of available PRN's for management of pain.	Through the development of education opportunities the home will provide training to the registered staff on the importance of using PRN's for pain management.	Education opportunities will be developed in the home.	We are aiming to have 1 education opportunity for registered staff each quarter of 2023 to increase understanding of the importance of using PRN's for pain management.	