Let's Make Healthy Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

Niagara Health System, Extended Care Unit (ECU) and Interim Long Term Care (ILTC)

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Overview

The Niagara Health System (NHS) owns and operates the Extended Care (ECU) and Interim Long Term Care (ILTC) Units. The Long Term Care Home in conjunction with the NHS focuses on quality and quality improvement initiatives. The Quality Improvement Plan (QIP) serves as the platform to guide the practices and quality improvement initiatives for the upcoming year 2016-2017.

Quality improvement is an ongoing journey. In the upcoming year the home will focus on three (3) of the four (4) quality dimensions. As a result of the home's better than benchmark performance in the dimension of 'Integrated', the home will not submit a quality plan. It will however continue to monitor our performance for ED visits.

The dimensions that will be reported on are:

Safety

- Falls
 - We will maintain our 2015/16 QIP target for falls as 13.3%. The home is still above the provincial target. The Falls Prevention & Restraint Reduction Committee has been redeveloped with the goal to have a more active role in falls management

Pressure Ulcers

• We will maintain our 2015/16 QIP target for pressure ulcers as 3.3%. The home is slightly above the provincial target. With the implementation of the 'Swift/Slide Sheets' for repositioning appropriate residents, reduced shear forces are experiencing thereby maintaining the integrity of the skin. The home has recently implemented standardized assessment tools to aid staff in their assessment promoting consistent wound documentation

Restraints

 We will reduce our target to 10.4% from our current performance of 12.2%. This is a stretch target of 2%. This reduction will be continued over the next 3 years to bring us to the provincial benchmark. The Falls Prevention & Restraint Reduction Committee has been redeveloped with the goal to have a more active role in restraint reduction

Effectiveness

- Hand Hygiene
 - We will continue to reach our target of 100% compliance. To improve overall results, the
 practice of immediate positive reinforcement was adopted along with immediate correction for
 non-compliance. The weekly results are posted publically in the home, with public recognition
 for 100% compliance

Resident Centered

- Resident Recommendation
 - We will maintain our 2015/16 QIP target of 95%. Stability has been achieved with the announcement of the NHS not selling the LTC Home license. This coupled with renovations to the ECU and a new method of additional communication to families will help to recognize the target.

Food Services

 We will raise our target by 1% to 89% satisfaction with food services. This will continue to measure not only the food service but the food that is served. Food Service is very subjective and has a tremendous impact on quality of life.

• Resident Experience

 We will raise our target to 95.5%. Activity and leisure pursuits are a fundamental part of quality of life. The activities that the home provides offer opportunities for meaningful engagement.
 Programs are designed to meet differing degrees of cognition.

QI Achievements from the Past Year

The home had great successes implementing changes that had a positive impact on the quality of care provided.

At the start of the 2015/16 QIP, the home had a score of 31.6% for 'Inappropriate Use of Antipsychotics in residents without a diagnosis of psychosis'. This put the home 6.6% above the provincial benchmark. With the strategies implemented as part of the QIP the home was successfully able to reduce that to below the target set, and below the benchmark to 23.8%.

Another area of tremendous gain was in the realm of Food Services. The benchmark was set at 75.8%, and we achieved 88.1%. This area will continue to be monitored as food plays an integral role in quality.

Integration and Continuity of Care

The home is committed to partnerships and works collaboratively with the Niagara Health System to support our quality improvement journey.

The home also works collaboratively with the Ontario Association for Non-Profit Homes and Services for Seniors (OANHSS) and other community partners i.e. other long term care homes, the LTC Network Forum, CCAC etc.

Transparency is key as part of the home's commitment to quality. The home's compliance status is publically posted in the home as well as on the MOHLTC website. The QIP is not only posted on Health Quality Ontario's website, it is posted internally within the home. The indicator results are shared with Resident's Council and staff alike.

The home offers a wealth of knowledge that is shared with our students, and future health care practitioners. Partnerships are in place with the local college and university. One of the home's physician's also shares her medical practice with students providing learning opportunities in the care of our elderly and their families.

Engagement of Clinicians, Leadership & Staff

The QIP is created using a collaborative approach. Decision Support assists in the setting of targets based on data collected, trends, and provincial benchmarks. The plan is developed in consultation with the leadership of the home. Once the home has finalized the plan, it is reviewed by the NHS senior leadership prior to approval by the NHS Quality Committee.

To further support the ongoing engagement of staff. QIP indicators are reviewed with frontline staff by the leadership of the home. With the launch of Huddle Boards in the home, indicator results are posted along with status reports for staff to have a current pulse on how well we are doing.

Resident, Patient, Client Engagement

Prior to the Annual Satisfaction survey being administered, it is reviewed with the Residents Council to ensure that they are in agreement with the survey on a whole, the questions being asked and permission for the inclusion of new questions to reflect practices in the home.

Once the survey has been completed, the results are shared with the Residents Council, prior to being made public within the home.

The QIP in addition to being shared with the Council, their feedback is sought for the indicators being measured as well as seeking their agreement in the targets set for the upcoming year.

Other

Life is infused into the QIP with it becoming the framework for the performance goals of the leadership of the home. Individual performance goals are set accordingly.

Sign-off

I have reviewed and approved our organization's Quality Improvement Plan

Barry Wright

Board Chair

Coleen Winger Administrator

Quality Committee Chair

Suzanne Johnston

President