



Continuous Quality Improvement Plan

DESIGNATED LEAD

LTC Home	Georgian Manor	Simcoe Manor	Sunset Manor	Trillium Manor
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Project Coordinator	Marco Hinds	Jacqueline Berchtold	Jacqueline Berchtold	Marco Hinds
Decision Support Coordinator	Olga Belanovskaya	Alex MacMillan	Alex MacMillan	Olga Belanovskaya

OVERVIEW

The County of Simcoe’s Health and Emergency Services Division is committed to providing high quality, resident centered care and services that improve every Resident’s quality of life. It is our vision to work consistently within all of our Long Term Care and Seniors Services (LTCSS) sites to create standards that ensure safe care, and enhance the Resident’s quality of life.

Throughout all of our quality improvement initiatives we strive to engage and collaborate with staff, Residents and their families to continuously improve our services while showing respect, dignity and compassion in all that we do.

QUALITY PRIORITIES FOR 2022/23

The County of Simcoe LTCSS is pleased to share its 2022/23 Quality Improvement Plan (QIP). Our ongoing commitment to quality is reflected in our mission “to provide effective, high quality, safe and efficient long term care services in a home-like setting for the clients and families that we serve”. This plan is the guiding document for all four of our Long Term Care homes listed above.

Our Quality Improvement Plan (QIP) for 2022-23 focuses on our objectives to provide high quality resident care that is safe, effective, and resident centered. It aligns with the key provincial publicly reported indicators identified by the Ministry of Health and Long Term Care (MOHLTC) as key determinants of resident safety. It serves as our roadmap and identifies opportunities to implement changes in practice to achieve better outcomes and meet resident expectations. Our QIP supports our strategic directions to achieve excellence, enable growth and build successful relationships with key stakeholders. It is aligned with our Long Term Care Service Accountability Agreement (L-SAA), our balanced scorecard goals and with our accreditation body’s required practices, standards and recommendations.

The County of Simcoe's Quality Improvement Plan demonstrates our commitment to improve quality and outlines strategies for ensuring patient safety, delivering optimal care, and achieving high resident satisfaction. Our quality improvement efforts include the following:

1. To reduce falls.
2. To reduce the worsening of pressure ulcers.
3. To receive and utilize feedback regarding resident experience and quality of life
4. Early identification of Palliative Care needs through comprehensive and holistic assessment
5. To reduce worsening symptoms of depression
6. To reduce residents with pain
7. To reduce use of antipsychotics in the absence of psychosis

The County of Simcoe's LTCSS quality improvement goals are aligned with the County of Simcoe's vision, mission, core values and strategic direction; as well as with the Long Term Care and Seniors Services mission and core values, and demonstrate that we are committed to providing safe, high quality resident centered care and services.

QUALITY OBJECTIVES FOR 2022/23

The Quality improvement metrics from our balanced scorecard include the following measurements to improve patient, resident, and family experience outcomes through inter-professional, high quality care:

- Falls – Total number of falls
- Wounds – Number of Residents who had a pressure ulcer
- Resident satisfaction surveys – Overall, I am satisfied with the care and services provided in Home
- ED Visits – Number of Resident ED visits
- Residents with depression and worsening depression
- Residents in pain and with worsening pain
- Antipsychotics – Number of antipsychotics prescribed in the absence of the associated diagnosis

QIP PLANNING CYCLE AND PRIORITY SETTING PROCESS

The County of Simcoe has developed QIPs as part of the annual planning cycle since 2011, with QIPs submitted to Health Quality Ontario (HQP) every April. The Quality Improvement Plan is created in order to meet legislative requirements, as well as disclosing our commitment to provide improved care for our Residents. The objective of the QIP is to sustain and/or improve to meet targets.

Performance, Quality and Development, in collaboration with the LTC Management team, facilitate the creation of the Quality Improvement Plan by using the provincial indicators, along with the Corporate and Home Priorities, and determine what areas will be the focus of this year's improvement strategies. The County of Simcoe's LTCSS QIP planning cycle also includes an evaluation of the following factors to identify preliminary priorities:

- Progress achieved in recent years
- Ongoing analysis of performance data over time through a Project and QIP Scorecard
- Results, goals and objectives from Required Program Evaluations
- Resident, family and staff experience survey results

- Emergent issues identified internally (trends in critical incidents) and/or externally
- Input from residents, families, staff, leaders and external partners including the MOHLTC
- Mandated provincial improvement priorities (e.g. HQO)

Preliminary priorities are subsequently presented and discussed at the Home Quality and Safety Committee meetings to review priorities and identify additional priorities that may have been missed. Priorities are reviewed and validated through multiple touchpoints of engagement with different stakeholder groups as QIP targets and high level change ideas are identified and confirmed. Final review of the QIP is completed by the LTCSS Leadership team, who endorses the plan for approval by the County of Simcoe county council.

The QIP Progress Report includes:

- Updates sharing the outcomes of the initiatives underway in the home for the current and previous year
- Reflecting on the change ideas, whether they had an impact on our goals and objectives, and deciding on which ideas to adopt or abandon
- Using this analysis in the development of future year's Quality Improvement plan
- Updating the Project and QIP Scorecard monthly ensuring accuracy and presenting the results at the Home's Quality and Safety committee

The Work Plan Development includes:

- In collaboration with the Management team, other Homes and service providers, creating a work plan that illustrates how to undertake improvements and change ideas on the indicators chosen.
- Updating the work plan with current goals and targets, as well as the planned improvement initiatives
- Referring to HQOs Quality Improvement Plans Guidance Document for Ontario's Healthcare organization
- Looking for opportunities to standardize change ideas across all four homes whenever possible
- Review with the Home Managers involved with the QIP to update action plan with current QIP data and changes to the plan at Home Leadership meetings.

THE COUNTY OF SIMCOE'S APPROACH TO CQI (POLICIES)

The County of Simcoe LTCSS policies, standard work and standards of practice provide a baseline for staff in providing quality care and service. The County of Simcoe's approach to CQI include, but are not limited to:

- Support departmental steering committees
- Required program workplan and evaluation
- Regular policy reviews
- Performance objective reviews by department
- Quality Improvement Plans (QIP)
- Home Quality and Safety Committee meetings
- LTCSS Quality Council
- LTCSS and Home Leadership meetings

Interprofessional quality improvement teams, including Residents and family, work through quality improvements to:

1. **Diagnose/Analyze the Problem** – Teams use various QI methodologies to understand the root cause of the problem and identify opportunities for improvement. This work can include process mapping or value stream mapping, 5 whys, fishbone, etc. Also included in this work, is an analysis of relevant data and completion of a gap analysis against relevant Best Practice Guidelines.
2. **Set Improvement Aims** – Once teams have a better understanding of the current state, they aim to improve and develop an understanding of what is important to the resident, to identify an overall improvement aim. This aim is used to evaluate the impact of the proposed change ideas through implementation and sustainability. At The County of Simcoe, improvement teams develop aim statements that are Specific, Measurable, Attainable, Relevant, Time-Bound (SMART). A good aim statement includes the following parameters - “How much” (amount of improvement – e.g. 30%), “by when” (a month and year), “as measured by” (a general description of the indicator) and/or “target population”
3. **Develop and Test Change Ideas** – With a better understanding of the current system, improvement teams identify various change ideas that will move The County of Simcoe LTCSS towards meeting CQI initiatives. Plan – Do – Study – Act (PDSA) cycles are used to test change ideas through small tests of change. PDSAs provide an opportunity for teams to refine their change ideas and build confidence in the solution prior to implementation, along with allowing all stakeholders to provide feedback in real time as the change is tested. Change ideas typically undergo several PDSA cycles before implementation.
4. **Maintenance** – Once an improvement initiative has undergone the necessary PDSA cycles and result in a stable process that provides what was intended to the satisfaction of the stakeholders involved, methods of maintaining the improvement begin. These methods include regular audits to ensure processes are followed, along with annual reviews that allow staff to continually improve the process to better care for Residents. As well, outcomes are measured and included in the Project and QIP Scorecard for monthly review and evaluation.

PROCESS TO MONITOR AND MEASURE PROGRESS, IDENTIFY AND IMPLEMENT ADJUSTMENTS AND COMMUNICATE OUTCOMES

Home Quality and Safety Committee meetings are held at each LTCSS location to support and promote quality, risk management and quality improvement initiatives. This committee provides a forum for discussion of issues relative to continuous quality improvement and Resident safety. The purpose of the Home Quality and Safety meeting is to provide updates, support continuous quality improvement initiatives for each home and improve the quality of care provided to our Residents through an interdisciplinary quality improvement committee that includes representation from management, front line staff, Residents, and staff. Each LTC home conducts a Home Quality and Safety Committee meeting to review home performance, support improvement activities and engage staff and stakeholders.

Workplan monitoring and evaluation of our QIP and CQI includes:

- Status updates in the monthly Home Quality and Safety Committee meeting discussions
- Status updates to the Quality Council management meeting discussions
- Documented evaluations of change ideas within the plan and Project and QIP Scorecard to determine which change ideas were effective and adopted as part of the overall process.
- One on one engagement with the Project Coordinator and Home Leadership team members monthly to review the strategies, evaluations and status of the plan.

Communication strategies are tailored to the specific improvement initiatives. Along with the regular Home Quality and Safety Committee meetings, communication will also occur, but are not limited to:

- Posting on Quality Boards in the home
- Publishing stories and results on the website
- Direct email to staff and families and other stakeholders
- Handouts and one on one communication with residents and staff
- Presentations to staff at staff meetings and huddles
- Presentations to Residents at Resident Town Halls and at Residents council
- Presentations to Families at Family Town Halls and at Family Council