

Let's Make Healthy  
Change Happen.



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



4/3/2019

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

[ontario.ca/excellentcare](http://ontario.ca/excellentcare)

## Overview

The Maples Home For Seniors is a Caressant Care Home in Tavistock, Ontario. It has a total of 43 long term care beds and adjacent to a Retirement Home.

It is the mission of Caressant Care 'to meet the assessed needs of our clients in a personalized, safe environment, to provide quality care while respecting resident rights, to maintain dignity while respecting diversity. and to support and engage everyone residing within our facility.'

We are proud of the resident centered care we provide and the ongoing engagement we champion with our community and partners. Within 2019-2020, The Maples For Seniors will strive to focus and improve on the following categories within our facility which align with the Caressant Care Strategic Plan, SW LIHNs focus, the Ministry of Health and Long Term Care, The Long Term Care Association, CARF International and local community partners such as CCAC, Integration and Continuity of Care:

- Continue to engage with Residents and their families to better understand there experiences
- Continue to improve resident and their families level of satisfaction
- Continue to reduce the usage of antipsychotics, as appropriate
- Continue to review and decrease Emergency Department transfers
- Continue implementation and usage of a new Skin and Wound Program
- Continue to reduce number of falls and identify those who are at a high risk

## Describe your organization's greatest QI achievement from the past year

The Maples is proud of our successes towards our targets from our 2018/2019 QIP and are continually reviewing and discussing ways to improve the home like atmosphere for our residents, staff and visitors. We have been successful in achieving low ED visits and will continue to strive to maintain a low number of ED transfers and to remain below the LHIN average. Having consistent physician coverage enables The Maples to keep the number of ED transfer low. Resident's at high risk for falls are reviewed monthly with Falls Committee and appropriate prevention strategies are implemented for these residents. We continue to be a Restraint free facility and ensure our residents and families upon arrival to the home are aware and understanding of this safety strategy. Antipsychotic reductions are completed quarterly with a multidisciplinary approach amongst the physician, pharmacist and recommendations by the BSO team and Registered Staff. In managing the responsive behaviours we are able to reduce the antipsychotic usage within the home. The Skin and Wound program has also undergone substantial improvements within the year. Registered staff ensure all skin and wound issues are assessed and monitored in a timely fashion which has resulted in having both Residents and Family members expressing how pleased they are with the reduced healing times being experienced or observed. The Activity program is a highlight for our residents with the initiation of our horticultural program, a recent purchase of a juke box along with an introductory of aromatherapy. Equipment continues to be purchased to accommodate the needs of the residents and windows are being replaced annually as budget allows. Two of our PSWs trained to become trainers to teach the Excellence in Resident Centred Care Modules to their peers. The Professional Advisory Committee continues to meet quarterly to share ideas of quality improvement. Lastly yet not least, The Ministry of Health has found no findings within the past 3 visits.

## Patient/client/resident partnering and relations

Through our established communication system we will ensure that we receive resident and family feedback throughout the future planning process.

We believe in Resident Centered Care and make every effort to better understand how our actions impact the lives of our residents and their families on a daily basis.

We have an open door policy and invite our residents and their families to aid in the development and continuous improvement to our Home and our Quality Plan. Besides sharing our facilities indicators, goals and ambitions and seeking feedback and suggestions at all times; we provide our residents and their families an opportunity to inform us of their goal for the year for their loved one that we can fulfill as a home. These discussions are further encouraged within monthly Resident and quarterly Family Council Meetings along within Care Conferences. All these findings are then viewed and analyzed by the management team using a multi-interdisciplinary approach to identify areas of needed improvement and/or change.

We also continually welcome opportunities to work with the LHIN which increases an awareness of the LIHN's strategic directions and address the needs of the community. Some of our current partnerships include those of the physician, pharmacy, physiotherapy, OT, respiratory, dietitian, mobility services, health unit, BSO external services and the Alzheimer Society.

### **Workplace violence prevention**

"The organization is committed to conducting a thorough review of incidents of workplace violence and prepare an annual trend analysis. Identified trends will be reviewed corporately through the Corporate Quality Committee and at the site level by the Health and Safety Committee, in collaboration with the BSO embedded teams, and Continuous Quality Improvement Committee. Opportunities for improvement identified through the trend analysis will form part of the organizations' Quality Improvement Plan." Continued awareness and education of staff through the use of Surge Learning modules, re-engaging the Health & Safety team to focus on audits, education on reporting, cultural diversity and supporting a violence and harassment-free workplace.

The Maples continues to review Corporate HR policies and procedures to ensure a healthy and safe environment is provided for our residents, staff and visitors. With the increase in residents with Dementia, comes a very likely increase of resident's with moderate to severe behaviours. As the illness progresses so can the behaviours which places the frontline staff at a very high risk of workplace violence. Our Strategic Planning for Corporate and Home Specific includes: utilizing operational budgets to provide for and maintain a safe building and grounds; annual Fire Department inspections; monthly Health and Safety inspections; monthly departmental safety inspections; a process for faulty equipment; Corporate Home Visit Reports; management of responsive behaviours, staff training and BSO internal and external services; police checks are obtained prior to new staff and volunteers starting in the Home; and, emergency code practice with debriefing. As mentioned, employees are trained annually to ensure complete understanding of the scope of workplace violence, including how it might be prevented and how it should be addressed. With the support of our Behavioural Support Team(BSO) partnering with the WGH Behavioural Support Outreach Team, our staff are given additional training throughout year. A binder has been created and utilized by staff that shares approaches others have used with a resident that has worked. Training has also included putting staff in circumstances to try to mimic some of the difficulties a resident may be having that could result in their behaviours. Each year The Maples is getting better at protecting our employees in providing them with tools and techniques on how to avoid being victims of workplace violence.

### **Contact Information**

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## Sign-off

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

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

Board Chair / Licensee or delegate Kim Leuszler \_\_\_\_\_ (signature)  
Administrator /Executive Director Joan Hergot \_\_\_\_\_ (signature)  
Quality Committee Chair or delegate Rhonda Duffy \_\_\_\_\_ (signature)  
Other leadership as appropriate Sandi Pooni, DON \_\_\_\_\_ (signature)