



Quality Progress Report for 2022

Caressant Care Cobden

March 2023

Caressant Care Nursing and Retirement Homes Ltd.

Brief Summary of Quality Improvement Achievements fiscal year 2022:

Building and Environmental Improvements:

Within the last fiscal year, our home has focused on required upgrades such as replacing the boiler system, installing a new call bell system to Unit 2 and completing upgrades to the parking lot to ensure safe and effective access for all visitor and residents.

Improvement plans for updating the esthetic appearance of the home were initiated and will be carried through in the next fiscal year.

Clinical Programs:

The following clinical programs were revised and rolled out last year: Skin and Wound Program, Plan for CPR (Advanced Directives) and Palliative Care. Further enhancements to the medication management program included the re-implementation of secured conversations and phase one of e-prescribe in Point Click Care (PPC) to support safer medication administration practices.

Communication and Technology:

Caressant Care continues to update and restructure our online learning management system to ensure required education modules are available and current. In 2022 we transitioned to a new electronic policy software platform with improved search functions and the ability to quickly update and revise if necessary which provides a user-friendly system for team members.

We have altered our communication strategy with more mobile devices, so we were able to connect residents and people of importance to them virtually. We continue to encourage the use of virtual technology and software to participate in Communities of Practice both internally within Caressant Care and externally with our community partners.

AMPLIFI has been initiated as a Point Click Care resource in the home to ensure a more streamlined information system between the home and the participating community hospitals. This communication system allows an improved transfer ability for our residents transitioning from acute care back to their home. Rollout has been ongoing through late 2022 and will continue to be utilized where required for the improvement of meeting care needs.

Compliance and Conformance

The corporation continues to manage any areas of non-compliance through our centralized reporting system. Further enhancement to this system included the sharing of “Compliance Communication Tip” sheets for all departments in the homes. Caressant Care continues to support a learning environment as it pertains to compliance by sharing information about inspections with all homes through our Compliance Key Messages program.

Infection Control:

Caressant Care recognizes the correlation between infection control practices and keeping our residents safe. Based on lessons learned during the height of the COVID-19 pandemic and the implementation of the Fixing Long-Term Care Act, 2021, our Pandemic Plan and several IPAC policies were reviewed and revised. Additionally, Caressant Care has supported the introduction of dedicated IPAC leads. The re-implementation of the IPAC Module in PCC along with the development of various corporate tracking tools has now allowed for homes to begin trending and analyzing of IPAC data.

Resident and Family Experience:

Surveys are completed throughout the year, and summarized semiannually with results returned to the home, to be communicated and reviewed for improvement initiatives. This process supports a nimble turnaround time for actionable items.

We had some positive results indicating a high level of satisfaction with areas on the Resident Satisfaction Survey, Some examples are below:

- ✓ Incontinence Products meet needs-96%
- ✓ Loyalty Question – Would you recommend this organization to others? – 88%
- ✓ Residents get the health services they need – 88 %
- ✓ Residents feel privacy is respected – 88%

Families additionally had positive feedback in many areas, some examples are:

- ✓ Loyalty Question – Would you recommend this organization to others? 100%
- ✓ Get health services needed – 100%
- ✓ Feel Privacy is respected – 100%
- ✓ My family member gets the care and support they need – 85%

Based on feedback received from family members we have revised our Satisfaction Survey process to indicate no response if families are unable to answer due to communication issues or a diagnosis of dementia or Alzheimer’s.

Quality Program

Our electronic software documentation system has revised their quality program “Insights” which can expedite report options and help to create reports that can be shared and discussed.

We have revised and updated many of our policies, education packages, program audits and operational audits to reflect and improve quality practices and to align with the Fixing Long-Term Care Act and regulations.

Other Comments:

Improvements in communication with our external stakeholders, staff, residents and their families is always ongoing. The use of current and the addition of different innovative communication resources such as One Call, newsletters, email, personal manager support, etc. has proven key in the improvement of our family and resident satisfaction surveys. We will continue to communicate changes and options for communication with all new admissions, current residents/families and current partners to ensure that transparency and accessibility remain of high importance to lead to increased satisfaction.

Please see attached for our priority Quality Improvement Initiative Progress Report for 2022.

Theme I: Timely and Efficient Transitions | Efficient | Priority Indicator

	Last Year		This Year	
Indicator #1	21.52	10	17.24	15
Number of ED visits for modified list of ambulatory care-sensitive conditions* per 100 long-term care residents. (Caressant Care Cobden)	Performance (2022/23)	Target (2022/23)	Performance (2023/24)	Target (2023/24)

Change Idea #1 Implemented Not Implemented

We will continue to strive to reduce and improve our current performance by identifying and monitoring each resident with an ER room transfer individually working with our external collaborative partners and our Medical Director and attending physicians to avoid emergency room admissions.

Target for process measure

- The home will endeavour to reduce # of avoidable ED visits/ 100 residents to 10% by end of year 2022.

Lessons Learned

Some of the lessons we have learned are communication is a key resource for understanding treatments based on goals of care to drive decision-making for emergency department transfers.

Change Idea #2 Implemented Not Implemented

Educate residents, staff, and families to provide knowledge of services and treatments available at the home. Provide and utilize resources to keep residents in the home if possible and avoid acute services that are not required or beneficial to the care process unless indicated or requested by the resident and/or family.

Target for process measure

- Overall the home plans to reduce the % of Ed visits to 10 % by end of 2022.

Lessons Learned

Small concise delivery of education/information is important for understanding, Although our changes did make an impact, improved understanding of noted goals of care during the move in process may still be a challenge for caregivers and decisions required when a change in status occurs. With education delivered in a clear concise manner, there has been observed improvement in residents and their caregivers driving their goals and aligning to unnecessary avoidance of transfers to hospitals.

Comment

Changes were implemented as planned, although the home did not meet our target, we did make some progress and are currently slightly below the indicated provincial average. This will remain a priority quality improvement initiative plan for 2023 with a revised target for continued improvement.