



# Quality Progress Report for 2022

Caressant Care Lindsay

Mary Street

March 2023

## **Brief Summary of Quality Improvement Achievements fiscal year 2022:**

### **Building and Environmental Improvements:**

Within the last fiscal year air conditioning has been provided in all resident's rooms.

We also had additional building and capital improvements such as:

- New flooring in various area of the Home
- Fresh paint in all hallways
- Replaced Exterior Door

### **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.

### **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:

- ✓ Residents get the health services they need – 85 %
- ✓ Residents feel privacy is respected – 100%
- ✓ Residents feel staff pay attention – 92%

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

- ✓ Loyalty Question – Would you recommend this organization to others? 100%
- ✓ Families feel their loved one gets the health services needed – 90%

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.

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

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

	Last Year		This Year	
<b>Indicator #1</b>	<b>11.72</b>	<b>8</b>	<b>27.63</b>	<b>18.50</b>
Number of ED visits for modified list of ambulatory care-sensitive conditions* per 100 long-term care residents. (Caessant Care Lindsay Nursing Home)	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 plan to reduce avoidable ED visits to 8 % by the end of the year Dec 2022.

**Lessons Learned**

In 2022, we experienced many changes and turnover of the Management Team and additionally some staff shortages; creating roadblocks for implementation.

**Change Idea #2**  Implemented  Not Implemented

Educate residents, staff, and people of importance to residents, to provide knowledge of services in house that are provided and utilize resources to keep residents in the home if possible and acute services are not required or beneficial to the care process.

**Target for process measure**

- The home will plan to reduce avoidable ED visits to 8 % by the end of the year Dec 2022.

**Lessons Learned**

Lack of staffing in 2022 including management and specific teams, made it extremely difficult to analysis information and educate others.

**Comment**

We recognize this as an important priority indicator and plan to continue with a focus on reducing avoidable emergency departments admission through 2023.