



2022 Quality Progress Report

Caressant Care Mary Bucke

March 2023

Brief Summary of Quality Improvement Achievements fiscal year 2022:

Building and Environmental Improvements included: new hand sanitizers at all points of care were installed. New LED lights were installed in resident rooms to replace glass ones. New Hepa filters in all congregate setting within the home. We also added an outside storage container for additional storage.

Dietary enhancements included a new Kitchen Range, stand up double-sliding door fridge and had our dining room painted.

We added additional building and capital improvements with a new nurse call system throughout the home.

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.

We purchased iPad(s) to ensure Facetime availability to residents/family members.

We also use Mass Message Lite and One Call to maintain ongoing communication with families and others.

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 would recommend us – 100 %
- ✓ Residents feel staff pay attention – 100 %

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

- ✓ Would recommend us – 88%
- ✓ My Family member gets the health services they need – 100%

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 Initiative Progress Report for 2022.

Theme III: Safe and Effective Care | Safe | Priority Indicator

	Last Year		This Year	
Indicator #1	23.38	15	21.85	--
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment (Caressant Care on Mary Bucke)	Performance (2022/23)	Target (2022/23)	Performance (2023/24)	Target (2023/24)

Change Idea #1 Implemented Not Implemented

Residents will be provided with medications appropriate to their diagnoses and to promote safe care outcomes this indicator will be monitored and reviewed.

Target for process measure

- The home will endeavour to achieve 15 % LTC residents without psychosis who were given antipsychotic medication by end of year 2022.

Lessons Learned

Changes were implemented as planned, and some progress was made, we are currently less than 1 % above the provincial average, and will continue with this initiative for improvement but not as a priority focus.

Comment

As we are very close to the Provincial average and have made further progress since the data date we will continue with this initiative but will focus on other areas as a priority for improvement.