

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

April 10, 2023

## OVERVIEW

Parkview Manor is a Southbridge Care Home with 25 suites located in Chesley. Our team is part of a larger organization whose overall plan is "One Team, One Mission, One Vision". Southbridge Care's Mission: To provide quality care and services through innovations and excellence.

Southbridge Care's Vision: Bridging lives together with meaning and purpose.

Southbridge Care's Values: We utilize the acronym LIVE.

Live life to the fullest

Implement change through innovation

Value the freedom of choice

Exceed expectations

In following Southbridge vision of bridging lives together with meaning and purpose, our quality improvement plan for 2023 – 2024 reflects our commitment to improve current processes, and to test new care approaches that will improve residents' quality of life. Our guiding principles are Southbridge's strategic theme:

- Operational Excellence – process and services are executed in a timely, accurate, value-added, and cost-effective manner that exceeds stakeholder expectations.
- Risk Reduction – a priority and an area that necessitates continuous attention. Areas of risk are identified, and mitigation plans are created and implemented in a timely manner.
- Customer Centered – we exceed our customers' expectations in all areas of services provided. When making decisions, our customers' needs, and requirements are a central consideration.

- Safety Culture – safety is embedded in all our processes to ensure we provide our customers and employees with a safe environment to live, work or visit.

Our strategic plan ensures services to our residents will have increased person-centered programming and recreational activity to support the specific needs of our residents. Residents will have increased involvement in decision making, as we now have resident members of all our committees, we have an active resident council, and we are ensuring that all employees, and stakeholders understand that Parkview is the home of the residents, and we have the pleasure of providing services in their home. We recognize operational excellence, risk reduction, and a customer centered safe culture imbedded in our strategic themes, to achieve results. Our leadership team will effectively manage organizational change by recognizing that changes in the resident environment must include the resident's prospective, legislation demands it.

Performance monitoring is a key part of driving our performance and includes but is not limited to the following:

- Monitoring key quality indicators
- Internal audits
- External audits
- Program evaluations

Southbridge Care Homes measures and monitors quality initiatives using data accuracy and quality indicator score cards.

Parkview Manor is proud to have seen progress in our antipsychotics without diagnosis and worsening wounds indicators. Parkview Manor HOME NAME also remains a least restraint home. Parkview Manor continually references best practices, implements Extendicare policy and procedure, consults with external resources

through Extendicare and Southbridge Care Homes, and engages staff and family members in discussions about how we can continue to improve.

Change management is in process, we are utilizing LEAN tools and techniques to achieve our required business outcomes and improve our resident care outcomes. It is the systematic management of engagement and adoption when the organization changes how work will be done.

Currently, we are developing action plans to address the necessary adjustments for our resident's needs, we will provide education, provide feedback to employees on the appropriate changes, and ensure our employees supported in the development of these plans. Our target is to continuously improve and to reach the corporate benchmark for all our indicators and have upper quartile provincial performance. As a result, our work plan for 2023/2024 will focus on the following indicators:

1. Antipsychotics
2. Emergency Department Visits
3. Percentage of Residents that agree they can express themselves without a fear of consequence

There are several challenges that could impact our ability to achieve our targets such as:

- The recruitment of qualified staff for RN, RPN and PSW's in our area often proves challenging. Due to the lack of licensed professionals in our community and the need that all our colleagues within health care have, at times we do struggle to retain staff.
- Turnover of multiple leadership roles and implementing new leadership roles. Resulting in lack of familiarity with current facility, staff, residents, and routine. Increased need for quality training.
- Ongoing COVID-19 pandemic.

At the home level, resident and employee engagement, culture, has

improved. Throughout the pandemic, the Team at Parkview Manor has supported each other through isolation, ever changing legislation, and staffing shortages. We have had amazing community support over the last 2 years. We are active members of our community which demonstrates co-operation and collaboration. Both our Resident and Family Council support has been ever present throughout the pandemic; these partnerships are valued and will continue to support the planned changes for the future.

## **REFLECTIONS SINCE YOUR LAST QIP SUBMISSION**

In 2022 we had many QI achievements and successes to celebrate. These successes can be attributed to the hard work and dedication of our multidisciplinary team, the collaboration with our residents, families, and stakeholders as we all share the common goal of improving the care, service, experience and life for all that live, visit and work at Parkview Manor.

- Significant reduction in the use of antipsychotic medications without a diagnosis of psychosis
- Maintained percentage of residents who responded positively to the statement "I can express my opinion without fear of consequences" at 100%
- Improved the percentage of residents who responded positively to the statement "I would recommend this site or organization to others" from 93.3% to 100%
- Maintained a 0% rate of residents who were physically restrained
- successful implementation of the "My Wishes" program in the home to ensure that our resident's end of life wishes are maintained and respected
- continue to maintain the use of zero restraints in the Home.
- Reduced the percentage of resident falls
- Reduced the percentage of residents with pressure ulcers to zero

We will continue efforts to maintain these achievements and work together with our multidisciplinary team, residents, families, and other stakeholders to achieve quality improvement targets in 2023.

## **PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING**

We know we are stronger when we work in partnership with those we care for, along with their families and our team members.

Partnering with residents and families improves quality: it enhances safety, informs people-centered care reflecting each residents' individual needs, improves coordination of care, supports equity, leads to better health outcomes, informs effective and appropriate care decisions, and improves our own operational efficiency.

With this in mind, we put considerable effort into regularly and actively engaging residents and families for their insights and feedback, provide channels for open dialogue, and share ongoing progress through regular updates, collaborative face-to-face meetings, townhall sessions and experience surveys. Our ongoing goal is to continue to build on our existing approaches to resident and family engagement and continue to evolve our approaches to resident and family Partnership.

Parkview Manor is working closely with our system partners to improve quality of care and safety for our residents.

- We are partners with physiotherapy whose goal is to provide individualized, one on one physiotherapy service. Their vision has always been to deliver physiotherapy services that are individualized, client focused, and evidenced based.
- Parkview Manor uses integrated service through the HCCCSS and Health Ontario SouthWest to work with occupational therapy for the ambulatory and locomotion needs of residents and assessments/services completed to ensure resident safety and comfort while ambulating
- We work closely with the HCCCSS and Health Ontario Southwest both in the community and in hospital. This allows for residents to move back and forth with as little as disruption in care as possible.
- Parkview Manor is working with Pallium Canada has been able to utilize their services of LEAP Palliative Care education for staff and palliative care support for residents, their families, and staff.
- Residents with specialized footcare needs are followed closely by

a qualified registered nurse

- Parkview Manor collaborates with Grey Bruce Health Services BSO Outreach which will come to the home to provide assessments and guidance in the treatment of residents suffering mental health issues.
- We work closely with Behavioural Supports Ontario in developing and implementing strategies for managing behaviours in the home both on an individual and strategic level.
- Access Mobile Dental provides eye and dental care for residents within the home.
- Parkview Manor is also has the Pain and symptom management support through Dr Battenteam from who that will come on an as needed basis.
- Parkview Manor has student RN's, RPN's and PSW's coming into the home to complete the clinical portion of their education.
- We have been very restricted in the last 2 years of Covid pandemic in community involvement in the home. We have a long history of volunteerism and participation in the home which we have had to suspend but begin to open our community back up in a safe manner to our volunteers.
- Accreditation Canada is an independent process of assessing health care and social services organizations against standards of excellence to identify what is being done well and what needs to be improved.

## PROVIDER EXPERIENCE

We are now into our next survey cycle, following Accreditation Canada's new Qmentum Long-Term Care Program which involves survey activities on an annual basis rather than once every four years. For 2023, all homes will complete self-assessments and develop updates to their quality improvement action plans. Homes,

supported by our central quality team, will implement their quality improvement action plans through the balance of 2023 and into 2024.

Pressure in the health system affects the people working in health care which creates an increase stress in the mental health and well-being of the worker. Measuring the experience of healthcare providers can help uncover important health system improvement opportunities. As the acute impacts of the pandemic continue to wane, our teams across Southbridge continue to demonstrate their resiliency and ability to adapt frontline care delivery, with compassion, and dedication on a daily basis. In response to the additional challenging demands as a result of the pandemic on our team members and their families, we expanded our employee services to meet their needs.

During the pandemic, we offered flexible monetary compensation off for any team member who was required to quarantine or self-isolate following COVID exposure. Home-level educational and counselling sessions have been offered to further support our team members in managing mental health through the pandemic. Our Employee and Family Assistance program is available to support our team members. This program provides team members with confidential and flexible supports, whether related to emotional well-being, managing relationships and family situations, dealing with workplace challenges, financial guidance, or other personal needs.

Ensuring our team members are well-equipped with the tools they need is a key pillar of our Improving Care plan. This includes training and development to build the leadership and technical skills needed to best serve residents. Recent topics highlighted include crucial conversations, compassion fatigue, cultural safety training, Five dysfunctions of a team, servant leadership, and strength based

training. In addition to receiving training on specific leadership expectations and learning about key corporate initiatives, participants are able to connect with colleagues and build skills and knowledge as change leaders.

## **WORKPLACE VIOLENCE PREVENTION**

Protecting the physical and mental health and safety of our team members remains a priority and is carefully considered by our Health and Safety team, who provides direct supports to team members. In 2023, workplace violence prevention policy and incident management education will undergo program enhancements for launch in 2024. It is the policy of the organization that each individual has the right to work in a professional atmosphere, in a harassment, discrimination and violence-free workplace.

Parkview Manor promotes the awareness of and proactive approach to dealing with violence and harassment in the workplace, and therefore will take reasonable steps to identify potential sources of violence and harassment, and to eliminate or minimize these risks through the Workplace Violence Prevention Program and application of associated policies.

Southbridge Care homes' safety talks also include the prevention of violence and harassment in the workplace and is a standing agenda item during our monthly meetings. Workplace Violence and Harassment Assessment is completed on an annual basis which determines the probability of injury and frequency of exposure to risk and used to create an action plan that will mitigate any risk identified.

## **PATIENT SAFETY**

Over the past year at Southbridge Care Homes, we have introduced

a number of strengthened quality and safety initiatives including comprehensive safety culture education for all team members. Our Medication Safety Technology (MST) Project is focused on improving medication safety through several streams of work, including by directly targeting one of our core quality indicators, antipsychotic deprescribing. Each home completed Medication Safety Self-Assessment to identify risk levels.

Southbridge Care Homes has increased Infection Prevention and Control (IPAC) capacity across all homes. IPAC Leads are designated in every home, providing daily oversight over proper IPAC practices throughout the home. IPAC Leads are supported by a central team of specialist IPAC consultants, who provide education, coaching and best practice implementation support. In addition, our regional IPAC specialists have advanced designations and certificates in various targeted aspects of IPAC practice, including facilities and redevelopment expertise, enabling them to support our communities in embedding prevention measures in various projects. Comprehensive IPAC reviews of each home are done annually, with frequent audits, to ensure the sector-wide learnings from the pandemic remain entrenched in all home operations. Our Pandemic Plan reflects the evolution of infection prevention in long-term care resulting from COVID-19's onset and is part of a more fulsome Emergency Preparedness program.

All key pandemic workstreams, such as staffing levels and PPE oversight, continue to be monitored which remains in effect to manage all outbreaks. Our vaccination programs – for COVID boosters and influenza – are ongoing and enabled by data analysis and weekly reporting to senior leaders. Daily case and outbreak reporting for all infections – COVID and non-COVID, across all homes – enables immediate central response to support homes. To strengthen our emergency preparedness program, we have

provided enhanced planning and preparedness training for homes, to ensure our teams are best equipped for swift and comprehensive responses to any and all emergencies if and when they do occur. Interactive preparedness training, frequent drills, scenario-playing, and introduction of tools that are easy to use in an emergency, are all part of our efforts in ensuring the safety of all of our residents and team members.

## HEALTH EQUITY

Southbridge Care Homes uses a health equity and diversity equity and inclusion lens when developing programs and services. Our programming honours the cultures and identities of our residents. Our homes with Francophone residents, offer group programs in French and English,. First Nations programming is provided in Southbridge Care homes where any First Nations people reside. Through such programs, First Nations residents and other participants join in group art and music activities, and smudging and spiritual ceremonies, facilitated by First Nations community members.

Pride celebrations are enjoyed throughout Southbridge Care homes, during Pride month and beyond. Group activities such as 2SLGBTQ (same acronym used by Ontario health) movie night and Rainbow Day are featured in our programming, alongside education and celebrating the lives of our 2SLGBTQ residents.

Many homes host an annual Carousel of the Nations, featuring booths and information hosted by residents, their loved ones, and our team members, where everyone in the home can sample food and learn more about one another's cultures. Several homes host large celebratory events! During Black History month, homes have hosted everything from cultural fashion shows to artifact displays, to acknowledgement presentations for residents of colour who have

served their communities. Diet offerings are tailored as much as possible to the requests of residents. Food choices that help a resident feel truly at home are an important part of honouring resident culture and dignity.

A proud part of our cultural diversity is related to our spiritual supports offered. We invite all denominations to our homes and ensure each resident has their specific needs met. Newly developed homes include a reflections space and a prayer mat for resident use.

### CONTACT INFORMATION/DESIGNATED LEAD

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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 on **March 22, 2023**

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**Ryan Bell**, Board Chair / Licensee or delegate

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**Sarah Henry**, Administrator /Executive Director

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**Leanne Haynes**, Quality Committee Chair or delegate

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**Kimberly Blackmore**, Other leadership as appropriate

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