

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

November 14, 2023



## OVERVIEW

Hope Street Terrace is a 97 home, 77 with reduction of basic accommodation, located in Port Hope. Our team is part of a larger organization whose overall plan is One Team, One Mission, and One Vision". Hope Street Terrace is owned by Southbridge Care Homes but managed by Extendicare Assist.

Southbridge Homes Mission: To provide Quality care and services through innovation and excellence.

Southbridge Homes Vision: Bridging lives together with meaning and purpose.

L-Live life to the fullest

I-Implement change through innovation V-Value freedom of choice  
E-Exceed expectations.

Extendicare's Quality Framework outlines the ways in which our home is supported to achieve success in all aspects of quality with a focus on quality of life, safety, compliance, and resident satisfaction. Extendicare's homes in Ontario are responsible for driving their quality improvement plan and work closely with specific consultant leads that support homes in their quality initiatives. Our strategic direction and the initiatives that support it also closely align with Accreditation Canada standards and meet the requirements of our LSAA.

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

To successfully advance quality, all staff is involved in data

collection, data analysis, satisfaction surveys and resource utilization analysis.

Extendicare measures and monitors our quality initiatives using data accuracy and quality indicator score cards.

Hope Street Terrace is proud to have shown improvement in the following indicators in 2022. We will continue to monitor our progress on these indicators:

- o Restraints
- o Worsened Pain
- o Worsening Wounds

Our goal is to continuously improve and to reach the Health Quality Ontario benchmark for all of our indicators. Our focus for 2023/2024 will be on reducing hospital transfers, reducing falls, improving family satisfaction by ensuring families can freely express their opinion and implementing a process for documenting palliative care needs among residents who are identified to benefit from palliative care. This will include goals of care, resident's wishes, symptom management and other preferences/holistic needs.

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

- Occupancy and the potential of not maintaining the 97% expectation is a challenge. Our home is one of the older homes in our community and our physical building cannot offer some of the design features that newer homes in our community can. If we cannot meet our 97% target, ensuring full funding then staffing

deficiencies may pose a challenge.

- The recruitment of qualified staff in our area is challenging. Due to the lack of licensed professionals as well as PSW's in our community this has been identified as a need regionally that has been identified by colleagues within the our health care region.
- Expectations to serve a wide variety of complex care needs, in an atmosphere where LTC is the answer for many specialties of care. The staff needs are greatly increased to meet this challenge. To mitigate any challenges continual advocacy through the Ontario Long Term Care Association, Extendicare and the HCCSS around funding challenges will be a priority. We continually reference best practices, learn from other Extendicare owned and partnered homes and engage staff and family members in discussions about how we can continue to improve.

We are looking into improved ways to recruit and retain qualified staff (we have implemented a recruitment lead), improve education offered to be able to better serve a wider range of complex residents and over all improve staff morale through our Sunshine Committee activities.

## REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Our home has also been involved in the following internal projects this past year:

1. We have worked diligently to reduce the number of falls by:
  - a) Hosting a Falls Prevention Awareness week to engage residents/families/staff, promote prevention strategies, etc.
  - b) Implementing the Falling Star program to identify residents who are at high risk for falls.
  - c) Utilizing the falls funding for falls prevention equipment
  - d) Discussing resident falls at our daily management/nursing meetings.

- e) The falls committee continues to review and identify frequent fallers, root cause analysis and individualized interventions.
  - f) Implemented the Four P's program (Pain, Proper Position, Prompted Toileting and Placement).
2. The home is currently restraint free – we have surpassed the corporate target of 2.5%. In 2023/24, we will continue to educate staff/residents/families as required and promote a restraint free home.
3. The home has successfully reduced the percentage of worsening stage 2-4 pressure injuries from 2.5% to 1.7%
- a. Providing enhanced education to staff on wound identification and appropriate, individualized, interventions.
  - b. Implementing photographs of wounds into the care record; at admission and upon return from hospital.
  - c. Having discussions with the interdisciplinary team on wound management during daily morning report.
  - d. Initiating weekly head to toe skin assessments by registered staff, in addition to daily skin assessments completed by care staff.
  - e. Implementing an educational wound care resource binder - which includes educational material of wound care management and categorizing wounds, turning clock regimes, policies and procedures and product utilization.
  - f. Purchasing additional LAL mattresses.
4. Bridge to Dreams Program (Southbridge initiative). The program encourages seniors to rekindle their passions and encourages them to celebrate their lives to the fullest. In 2022, Hope Street Terrace was able to assist one of our residents in having a dream come true. Hope Street will continue this initiative throughout 2023-24.

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

Hope Street Terrace actively collaborates with various partners in efforts to improve integration, quality indicators and continuity of care for our residents. We work closely with the NP STAT program, Novo Peak Health (physio), Psychiatric Assessment Services for the Elderly (PASE), Medical Mart, HCCSS, local hospitals, Care RX pharmacy, ARJO, Homestead, Life Labs, STL Diagnostic Imaging, Community Care and the HKPR Public Health Unit. Hope Street Terrace is committed to connecting our residents and staff with the best available resources to meet the needs of our residents.

We are also looking forward to future collaborations with the Ontario Health Teams.

## PROVIDER EXPERIENCE

Hope Street Terrace recognizes the importance of engaging residents and families in our quality improvement initiatives and programs. The partnerships we create contribute to the overall success of the home as well as the satisfaction and quality of life of our residents.

We encourage our residents and families to participate in annual resident satisfaction surveys. We use the results/feedback to evaluate where we can improve care/services to meet the needs of our residents and to drive change ideas within the home.

We facilitate a monthly Resident's Council and Food Council meeting to provide our residents with an opportunity to provide input/suggestions for improvement, meal suggestions, discuss any challenges they are facing etc. The meetings also allow the home to provide residents with relevant updates and information such as ministry inspection reports, quarterly indicator results, outbreak summaries, accreditation results, upcoming events, etc.

Additionally, we keep our residents and family members informed using newsletters, televisions in the home, information boards, town hall meetings and posters.

In 2019, the home was accredited by Accreditation Canada. During the survey, we had resident participation in the IPAC meeting. We are fortunate to have a resident driven hand hygiene program prior to meals in our main dining room. During the meeting with the surveyors, our resident lead was able to share the success of the program.

Additionally, we involve residents/families in the development of their individualized plan of care that addresses medical conditions, care needs/goals of care, resident preferences, etc.

## WORKPLACE VIOLENCE PREVENTION

It is the policy of Extendicare that each level of management and all staff comply with Occupational Health and Safety legislation and standards to provide a safe workplace. Extendicare promotes a safe workplace by:

- Enforcing the zero tolerance of abuse policy
- Ensuring the environment is safe/secure (lighting in parking lot/stairwells, reception area, etc.)
- Reviewing all incidents that have occurred
- Putting an action in place based on the risk assessments where improvements are required
- Investigating all incidents in a fair and consistent manner
- Enforcing the workplace harassment and bullying policy
- The home plans to re-introduce GPA in the coming year to ensure staff are properly trained to respond to responsive behaviours in the home with a goal of reducing injuries to both residents and staff.

## 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 honors 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

April Beckett - Executive Director [abeckett@southbridgecare.ca](mailto:abeckett@southbridgecare.ca)

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(905)885-6367 ext. 224

## 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 7, 2023**

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

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**April Beckett**, Administrator /Executive Director

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**Sarah Annesley**, Quality Committee Chair or delegate

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**Davina Dowdall**, Other leadership as appropriate

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