

## **Continuous Quality Improvement – 2024/2025 Report**

### **Designated Lead**

Denise McCormick

Assistant Director of Nursing and Quality Improvement and Training Coordinator

### **PREAMBLE**

Hastings Centennial Manor is one of two homes operated by the County of Hastings in partnership with the cities of Belleville and Quinte West. We have a diverse, inclusive team of residents, care partners, families, team members and community partners to ensure our residents have the best possible experience while living in our home. Our Quality Improvement Plan is guided by Hastings County corporate mandate of – Supporting People and Our Communities, and Hastings County Long Term Cares Vision and Mission and Values.

### **VISION STATEMENT**

Leading the way through continuous improvement in resident-centered care.

### **MISSION STATEMENT**

Our long-term care team works together to optimize quality of life in a diverse environment of compassion, safety, and comfort.

### **VALUES**

Supportive Environment

Honesty and Integrity

Accountability

Respect

Empathy

Being a rural home, Hastings Centennial Manor remains dedicated with the journey to Person-Centered Care. Recognizing the current human resource challenges being faced by the long-term care sector, our residents are our priority. We continue to focus on providing high quality care and services supported by a strong community of partnerships and continue to be recognized as a trailblazer in non-profit long-term care.

In 2019 we successfully implemented Excellence in Resident Centered Care, supported by Conestoga College and the Centers for Learning, Research and Education. We are pleased to continue improving Resident Centered Care by becoming a Best Practice Spotlight Home – LTC, through The Registered Nurses Association Organization.

## **WHAT IS CONTINUOUS QUALITY IMPROVEMENT (CQI)**

CQI are actions carried out based on set standards used to improve processes, safety and resident care. Actions of CQI may make improvements in operations, outcomes, processes, work environment and regulatory compliance. Our 2024/2025 QIP continues to build on past success, with further improvements anticipated.

### **QUALITY PRIORITIES FOR 2024/2025**

#### **Priorities Requiring Focused Action:**

1. Enhance resident quality of life measured by Resident Satisfaction Surveys to reflect increased percentage from 83% to 100%. The perspectives of diverse residents, care partners and community members will be incorporated into the satisfaction surveys with the purpose to achieve person centered care goals in alignment with the Fixing Long Term Care Act, 2022.

#### **Priorities Requiring Moderate Action:**

2. Reduction in the Number of Potentially Avoidable Emergency Department (ED) Visits from 21.48% to 21.05% The goal is to be under the provincial average.

#### **Priorities Requiring Monitoring:**

3. Reduction in percentage of residents without a diagnosis of psychosis who are given antipsychotic medications from 12.12% to 11.88%. The goal is to be under the provincial average.

## **QIP PLANNING AND PROCESS**

Hastings Centennial Manor's Quality Improvement Committee will oversee sub-committees dedicated to the planning and implementation of quality improvement initiatives which have been determined based on current performance and need. Our Quality Improvement and all sub committees are interdisciplinary with front line and leadership team members and also include residents and care partners/families' representation. Priorities are shared with Resident and Family Councils as well as our Long-Term Care Committee. Our committees will:

1. Identify Improvement Initiatives
  - Based on current performance data, improvement ideas will be identified.
2. Set Targets for Improvement
  - Once data is reviewed, targets will be set to measure using SMART (Specific, Measurable, Attainable, Relevant, Time-bound) methodology.

### 3. Develop and Test Change Ideas for Improvement

- Utilizing current policies, procedures, processes and Best Practice Guidelines, the teams will implement and test change ideas through Plan-Do-Study-ASct (PDSA) cycles to test for success and offer an opportunity to refine change ideas as required prior to wide-spread implementation. The PDSA will be available for all team members to view in the staff education room.

### 4. Implementation

- Once PDSA cycles are complete, the sub-committee, with the support of the QI Lead, will develop the change idea ensuring that:
  - o Risks to success are identified and mitigated.
  - o Changes are embedded into existing workflow (e.g. policy, procedure, documentation platform).
  - o Education is provided to team members and resources to support changes are available (e.g. quick reference guide).
  - o Communication is provided to all stakeholders.
  - o Implementation plan for spread, is in place.

### 5. Monitoring

Monitoring of the change ideas will be an ongoing requirement to identify successes as well as areas that may require revision after implementation. Data will be collected through documentation reports, CIHI Data, and satisfaction survey results. Communication of improvement strategies and successes or revisions required will be key in maintaining momentum. Multiple methods of communication will be required to reach all stakeholders, and these include, but are not limited to:

- Posting in team member lounge
- Website
- Newsletter
- Handouts
- Presentations during team member education, family council and resident council meetings
- Team huddles
- Committee member champions

### 6. Survey and Results

- Survey questions were reviewed in October 2023 by Resident and by Family Council Representatives.
- Resident and Family Caregiver Experience Survey data collection period was from November 22 – 30, 2023.

- Resident and Family Council reviewed the survey data in January 2024.
- Action Plan finalized on March 20, 2024 capturing input of Resident, Family Council and Team Members

#### 7. Improvements

- CQI Committee reviews results of the QIP and the Residents and Family Experience Survey throughout the year.
- Finalized Resident and Family Satisfaction Survey action plan communicated to:
  - o Team Members – March 2024
  - o Resident Council – April 2024
  - o Family Council – April 2024
- Attached are the 2023 Hastings Centennial Manor Resident Satisfaction Action Plan and 2023-2024 Workplan QIP