

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 1, 2023



OVERVIEW

Brucelea Haven is committed to improving the quality of care provided to residents within our long-term care home, as well as enhancing the resident and family experience through communication and engagement. Our motto of "residents first, every day, every way" is one that our team is proud to stand by and translate into each interaction with colleagues, visitors, and residents.

This year, our quality improvement plan focusses on measurable outcomes to achieve positive growth in the areas of falls prevention, response and management, reducing antipsychotic usage, resident satisfaction, and reducing the number of preventable emergency department visits.

Our team is comprised of multidisciplinary professionals who meet on a regular basis to discuss progress towards achieving improvement outcomes. We are committed to sharing progress monthly with staff, residents, and family members through Town Hall meetings and Resident's Council meetings.

We are most proud of the recent success we have had within our skin and wound program and celebrating 10 years of active work from our Behavioural Support Team at Brucelea Haven.



PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

Engagement with residents related to Quality Improvement initiatives happens on a regular basis through discussions at Resident's Council meetings. The home has committed to holding bi-annual meetings with residents and family members regarding Quality Improvement and sharing progress and plans and requesting feedback. We worked with Resident's Council to ensure the Annual Satisfaction Survey was sufficient in meeting their needs and questions covered all areas of daily life.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

In reviewing our last QIP submission, a baseline was established for a number of indicators including those surrounding resident satisfaction. Now that that baseline has been created, we have action plans put in place to address areas for improvement. We look forward to continued progress and action to be taken in the other areas, and sharing our successes and challenges with our partners.

PROVIDER EXPERIENCE

Provider experience is an area of heavy focus for our organization, over the last several months, we have engaged in external leadership training for our frontline nurses, as well as our leadership team, to support decision-making and the integral role they have as leaders for Personal Support Worker and Resident Support Assistants.

We have developed a Communication Working Group wherein we have established a set of communication standards for all staff within the organization to commit to, to develop accountability and ensure support is available and accessible. We work regularly on initiatives for staff engagement and recognition, and have plans to establish a staff engagement committee to focus our attention on these initiatives.

We provide staff with resources to support their mental health and wellness through our Employee and Family Assistance Program, and Corporate Wellness Committee. We annually seek feedback from staff through the Guarding Minds Program and engage staff through opportunities to participate in various committees and working groups to enhance the employee experience.

WORKPLACE VIOLENCE PREVENTION

Our workplace violence prevention program is a joint initiative through our Corporation and the home's Joint Health & Safety Committee, with responsibilities outlined for all staff and management. Incidents of resident aggression are documented and tracked through an internal system, and each incident is followed up with by a member of our Human Resources team. We look at trends and ensure that the appropriate interventions and referrals are put in place to support the safety of all team members, visitors, and residents.

Workplace violence assessments are completed annually by the H&S team, where environmental, physical and human threats are assessed and addressed if needed. All staff are equipped with resources to support workplace violence prevention, and are aware of the presence of the JHSC and where to access policies.

CONTACT INFORMATION/DESIGNATED LEAD

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OTHER

Brucelea Haven's continuous quality improvement initiative report highlights the priority areas for improvement for this upcoming year (2023/2024) including:

- Reviewing 100% of falls and falls prevention measures including post-fall huddles
- Improving services excellence and resident engagement through ensuring 100% of resident concerns are tracked and responded to in a timely manner
- Engaging residents at care conferences to ensure they feel safe expressing their opinion
- Training all direct care staff in the Gentle Persuasive Approach in an effort to reduce antipsychotic usage
- Utilizing our Clinical Care Coordinators to regularly review antipsychotic usage in residents and ensure appropriate diagnosis and documentation is present

This initiative report aims to share successes and priorities so families, residents, and staff can be engaged quality improvement, and provide feedback and input into our processes to ensure quality resident care.

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

Board Chair / Licensee or delegate

Administrator /Executive Director

Quality Committee Chair or delegate

Other leadership as appropriate
