



Continuous Quality Improvement Initiative Report 2023-2024

Designated Lead

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Quality Priorities for 2023/24

St. Patrick's Home of Ottawa has a long and very proud history. Founded two years before Confederation, it is one of the oldest long-term care homes in Ontario.

We have finalized our Strategic Plan for 2022-2026. It will be the guiding document for our quality work for the coming years.

Who we are

Our Foundation

A Catholic organization inspired by Christ's ministry and the legacy of the Grey Sisters of the Immaculate Conception.

Vision

A welcoming and inclusive home where each person feels cared for, supported and engaged.

Mission

Quality, person-directed long-term care and support for people in our community.

Our Values

Together as residents, families, friends, staff, volunteers and Board members, we embrace and live the values of St. Patrick's Home in all we do.

Respect

See every person for who they are, honouring their preferences and their individuality.

Compassion

Be kind, ease suffering, share joy.

Spirituality

Nurture each person's own spiritual beliefs and practices.

Integrity

Be honest, transparent and accountable, even when it is difficult.

Excellence

Strive always to do and be our best, knowing there's no finish line in the pursuit of excellence.

Collaboration

Communicate openly and actively so we can work as a team toward common goals.

<p>Strategic Priority 1 The best possible quality of life for every resident</p> <p>Outcomes</p> <ul style="list-style-type: none"> a. Our care is guided by residents' preferences and needs for physical, emotional, social, spiritual, and psychological wellbeing. b. Our flexible processes and ways of working accommodate different and changing needs. c. Everyone in our St. Patrick's Home family has greater opportunities to engage with each other and with the wider community. 	<p>Strategic Priority 2 Consistent, person-directed, quality care and support</p> <p>Outcomes</p> <ul style="list-style-type: none"> a. We match our level of care to residents' individual needs and strive to always provide the best-quality care possible. b. Staff feel equipped and empowered to provide quality person-directed care. c. Our systems, processes and equipment support consistent, person-directed quality care and the safety of residents and staff. d. Everyone works together in each resident's best interest — families, friends, staff, volunteers, residents themselves and/or their substitute decision-makers.
<p>Strategic Priority 3 A purposeful partner in the health system</p> <p>Outcomes</p> <ul style="list-style-type: none"> a. All of us involved in St. Patrick's Home — residents, families, friends, volunteers and staff — share an understanding of critical health system gaps, identify opportunities and present a strong, collective voice for positive change. b. We strive to foster greater coordination and connection among health and social service partners, engaging effectively and drawing on our day-to-day understanding of long-term care realities. 	<p>Strategic Priority 4 Supportive affordable housing and services to meet community needs</p> <p>Outcomes</p> <ul style="list-style-type: none"> a. Plans to expand housing and services that defer or provide an alternative to long-term care have broad support throughout the St. Patrick's Home community. b. We develop our expanded campus thoughtfully, minimizing disruptions and creating new benefits for our Home and the broader community. c. We secure the funding needed to fulfill our housing plans and provide associated supports.

QIP Planning Cycle and Priority Setting Process

In addition to performing and evaluating our Resident Satisfaction Survey and following Ontario Health's recommended areas of quality, we also look at the following factors when developing our Quality Improvement Plans (QIP):

- Our goals and objectives from the previous years as well as our overall Home's strategic goals
- Ongoing analysis of our performance indicators that are available from the Canadian Institute for Health Information (CIHI). These indicators allow us to analyze our trends over time but also compare to the provincial average.
- Family and Friends feedback survey
- Ongoing analysis of our internal complaints and feedback from families, designated caregivers, staff, and residents
- Ongoing analysis of critical incidents

This year's QIP focuses on increasing Resident's quality of life and include the following suggested Ontario Health priority indicators:

- Increasing Resident's comfort with their ability to express their opinion without fear of consequences. Our goal is to move from a Resident satisfaction score of 61%, back to 74%, which was our pre-pandemic score.
- Decreasing the number of Residents without psychosis who are given antipsychotic medication. Our target score is 21.4% from 25.9%. This would put us on par with the provincial average.

In addition to the priority indicators set out by Ontario Health, St. Pat's has committed to continued work on the following initiatives:

- Increasing availability of enjoyable things for Residents to do in the evenings and on weekends. We would like to return to our pre-pandemic Resident satisfaction score of 46%. Our score in 2022 was 32%.
- Increasing availability of Resident's favourite foods. Our Resident satisfaction score in 2022 was 40%. We would like to return to the pre-pandemic score of 52%.
- Increase the number of Residents who feel the staff respect what they like and dislike. We are aiming to return to our pre-pandemic score of 78% from our 2022 score of 70%.
- Decrease the number of Residents with new stage 2-4 pressure ulcers. This Rai MDS indicator sits at 4.2% presently and we would like to be at provincial average of 1.9%.

St. Patrick's Home of Ottawa's approach to Continuous Quality Improvement

Internal challenges are looked at as opportunities to improve. When an area is identified as something we need to focus on, we use the A3 process of quality improvement.

A3 Report Name

1. Background <ul style="list-style-type: none"> - Importance - Context 	5. Countermeasures <ul style="list-style-type: none"> - Possible Solutions - Go Back to Goals and Add Details If Needed
2. Current Situation <ul style="list-style-type: none"> - Problem Statement - Process Mapping 	6. Implementation <ul style="list-style-type: none"> - List of Actions - Assign Responsible Individuals
3. Set targets/goals <ul style="list-style-type: none"> - Desired Outcome - Success Metrics 	7. Follow-Up <ul style="list-style-type: none"> - Report Results - Standardize or Modify
4. Root Cause Analysis <ul style="list-style-type: none"> - 5 Whys - Dig Deeper - Find Initial Problem 	Project Leader: _____ Team Members: _____ Department: _____ Date: _____

Kabanazie, 2022

The A3 tool is part of the greater LEAN methodology that has been used across many healthcare and non-healthcare organizations. This allows us to work through the problem in a methodical manner. One of the pivotal pieces of this method is the idea of Plan-Do-Study-Act (PDSA). The concept is that we trial a solution, measure its success (or failure), and try again until we get it right. It is expected that a successful improvement will go through several PDSA cycles before implementation.

Resident and Caregiver partnering and relations

We are committed to ensuring that residents and care givers have a voice and input into everything we do in the Home. We are doing this by ensuring there is a Resident and Family Council representative on all committees and working groups, as well as quality improvement initiatives.

They are pivotal in not only providing feedback, but driving new initiatives and building new ideas from the ground up.

We are actively working on four organization wide projects, all with Resident and Family Council involvement. They include:

The Linen Project: This project aims to ensure that all team members have access to linen in the right place and at the right time. We are using our Quality Improvement board to share our work and findings. We will be doing a series of Plan-Do-Study-Act (PDSA) trails to come up with the best solution.

The Medication Management Project: St. Pat's was selected as one of eight Champion Homes by The Institute for Safe Medication Practices (ISMP) Canada. We have recently completed the formal part of this project but are continuing to work to integrate an electronic medication error tracking system as well and improving the feedback loop.

i-Care Plans: We received a Healthcare Excellence Canada (HEC) grant to do work on person-delivered care. The partnership with HEC is completed but through this grant we were able to complete a re-write of the care plan library to put it into first person language. We are in the process of electronically updating the library so when new care plans are built or amended, this will be the default language. An example of "I" language may look something like this: "I do not like loud noises. Please approach me quietly and speak softly", as opposed to "Speak quietly to the Resident".

Sign Project: Residents had brought forth how many times it is difficult to read signs, how they are frequently torn or falling off. So far, the project has moved all Covid-19 signage from inside the RHA out to the elevator area, as well as removed any signs that were damaged or no longer significant. We are presently working on a sign template that would ensure we are using a minimum font size to maximize readability and also require and take down date for all signs.