

# Implementation Plan Status Report for January – March 2024

St. Pat's has an Implementation Plan for our Strategic Priorities that is aimed at advancing them in a systematic way spread over the lifetime of our 2022 – 2026 Strategic Framework. The Implementation Plan is updated annually based on the priorities and what is achievable. A Status Report of the 2024 Implementation Plan will be reviewed by the Board of Directors quarterly and is also posted in the Home as a communication tool for residents, staff and families. This Status Report is also posted on our website.

**STRATEGIC PRIORITY 1: The best possible quality of life for every resident**

**Outcome A:** Our care is guided by residents' preferences and needs for physical, emotional, social, spiritual and psychological wellbeing.

**Outcome B:** Our flexible processes and ways of working accommodate different and changing needs.

**Outcome C:** Everyone in our St. Patrick's Home family has greater opportunities to engage with each other and with the larger community.

FOCUS	OUTCOME TARGETED	ACTIONS	MEASURES	TARGET/GOAL	TIMELINE	ADJUSTED TIMELINE	LEAD	SUPPORT/TEAM	STATUS REPORT Q1
<b>Person Directed Care/Culture Change</b>									
<b>Evolve Person Directed Meal Service</b>	A,B,C	Implement a A la Carte Menu to enhance food choices	QOL, Resident, family, staff surveys	"more choices" Improve by 10%	Q1 2024		Paul	Interdisciplinary team	A la Carte menu was implemented in 2023. Is being reinforced through the new software to encourage A la Carte as a regular meal option.
	B	Explore Dining Service electronic programs that will enhance a Person Directed approach to care and improve pleasurable dining	All food related measure on the QOL survey.	To initiate a program that has a person directed focus and does not increase workload	Q1 2024		Paul	Nutrition and Hydration Team	Software was chosen and purchased in 2023. Implemented on 4 RHAs as of end of Feb 2024. Goal to have implemented on all 9 RHAs by the end of March 2024.
	A	1) Speak with residents on 2 of the lowest scored RHA's. 2) Add the question " what is your favourite meal" to new admission Assessment 3) Provide the resident their favourite meal on their birthday if wanted.	QOL survey results	Improve by 10% overall satisfaction Qol Survey of "I get my favourite food here"	Q2 2024		Paul	Interdisciplinary Team	3) Residents are being asked by Nutritional Supervisors what they would like for their birthday meal, started in February 2024.
<b>Resident Engagement</b>	A, B, C	Develop further opportunities for residents to be engaged in the life of the home and find purposeful activities that involve them in the home.	Number of new activities that residents engage in	Aim for a newly developed resident engagement activity each quarter starting Q2	Ongoing		Robert, David, Monique	Leadership Team, Claire	Residents participate in potential hire interviews and on clinical teams. Further enhancement to be developed
<b>Leverage Technoogy</b>									
<b>Quality Improvement</b>	A,B,C	Finding creative ways to ensure staff are aware of and follow the care plans	#findings from the Ministry on care plan, # of complaints, # of CIs	Decreases by 5% annually	Q4 2024		Pam, Jeena	RAI Coordinator and clinical teams	Safety items developed from logos to a one page template with a library to choose logos to be posted above residents' bed. These can be removed from Kardex to enhance other communication.
		Enhance communication through thei integration of Activity Pro and Point Click care	% of project completion	100% completion	Q3 2024		Robert	RAI-C and Rec team	Demonstration completed and waiting for quote from activity pro to be approved.
	B	Futher enhance technology with Medication Safety; Automated Dispensing Cabinet and barcoding	# of medication errors	To initiate technology that inproves medication safety. Decrease med errors by 5%	Q1 2024		Pam, Jeena	Medication Safety Team	Automated dispensing cabinet has arrived and training plan is underway. Bar Coding implementation is at the point of pharmacy integration.

**STRATEGIC PRIORITY 2: Consistent, person-directed, quality care and support**

**Outcome A:** We match our level of care to residents' individual needs and strive to always provide the best quality care possible.

**Outcome B:** Staff feel equipped and empowered to provide quality person-directed care.

**Outcome C:** Our systems, processes and equipment support consistent, person-directed quality care and the safety of residents and staff.

**Outcome D:** Everyone works together in each residents' best interests - families, friends, staff, volunteers, residents themselves and/or their SDMs.

FOCUS	OUTCOME TARGETED	ACTIONS	MEASURES	TARGET/GOAL	TIMELINE	ADJUSTED TIMELINE	LEAD	SUPPORT/TEAM	STATUS REPORT Q1
<b>Clinical Teams Person Directed Care</b>									
<b>Wound Prevention</b>	A,B,C	1) Prevention of wounds: Early detection of high risk for skin breakdown using the PURS score of 4+, ensuring repositioning clocks are in place and audited for compliance with the care plan	Audit 50% of residents with a PURS score of 4+	90% or higher have the clock in place and repositioning is occurring	Q2 2024		Pam, Jeena	Wound and Skin/Nutrition Team	Audit is created for wounds.
<b>Change in Condition</b>	C	2) Ensure the NLOT ( NP Program in collaboration with TOH) visits residents who are sent to ED and who have a change in condition	Referrals in PCC	% of residents seen by the NP who went to hospital. # of residents seen that did not go to hospital and was referred to the NP	Q2 2024		Pam, Jeena	Clinical team and Dr. Fung	Nurse Practitioner contract signed and starting end of Feb.
<b>Staff/Team Work</b>									
<b>Recruitment, Retention and Mentoring</b>		Engagement of frontline staff, residents and family on the Recruitment, Retention and Mentoring Team to direct and problem solve in a team approach, keeping resident-directed care the focus. Develop an Terms of Reference for the team as well as an action plan for 2024 and implement the action plan.	TOR and Action plan completion	TOR completed and Action plan created, percentage of implemented plan	Q1 2025		Tracey	Recruitment, Retention and Mentoring committee	2 Meetings were held and booked for the year. TOR completed and approved. Action plan in development, with top 3 priorities from the team.
<b>Engagement/Communication</b>									
	C,D	Engage residents, staff, families, visitors and volunteers in IPAC education using IPAC modules being developed for our Website.	# participants	100% of staff and volunteers to complete modules and collect data for residents and families	Q4 2024		Pam, Jeena	Ayoub, IPAC Team	Modules are almost completed with McGill University. Backend of website being updated with plugins to run the program. Modules to be ready for May 2024.
<b>Safety and Security</b>									
	D	Develop an Emergency Planning Committee, that includes resident and family, staff members.	committee meets	Committee up and running 3	Q3 2024		Paul	Committee, Paul	Recrutiment started in January 2024. TOR developed.

**STRATEGIC PRIORITY 3: A purposeful partner in the health system**

**Outcome 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.

**Outcome 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.

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<b>Collective System Voice</b>									
	A	Support residents to be involved in OARC and Family and Friends Council to participate in Regional Family Council of Ontario and Ontario Caregivers Association by providing awareness and resources. Participate in LTC relevant research opportunities.	# of residents engaged	At least one resident engaged with OARC. Ongoing resources shared with RC and FFC.	Ongoing		David	Resident Council	Resident LF is participating as a speaker at a conference in May as a St. Pat's resident as well as from ORCA. David continues to share FCO and ORCA resources with FFC.
<b>Foster greater coordination and connection among health and social service partners</b>									
	B	Take every opportunity to volunteer with Ontario Health provincially and regionally, to represent needs of all residents in LTC, including mental health and younger adults. Employees and Leaders sit on Communities of Practice & External Committees	# of committees that St. Pat's participates in outside the organization	Have 75% of leadership team sit on an external committee	Ongoing, goal met by end of 2024		Monique	Leadership Team	Monique sits on Person Centered Care Community of Practice and on Eastern Ontario LTC Senior Leadership & Community Partner Quarterly Meeting, Monique is also on the Digital Health Advisory committee and sub-committee for Cybersecurity group for the Ministry. Monique is on the AMPLIFY Clinical Advisory Committee. Tracey works with another CHSO organization to provide HR support.

**STRATEGIC PRIORITY 4: Supportive affordable housing and services to met community needs**

**Outcome 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 community.

**Outcome B:** We develop our expanded campus thoughtfully, minimizing disruptions and creating new benefits for our home and the broader community.

**Outcome C:** We secure the funding needed to fulfill our housing plans and provide associated supports.

FOCUS	OUTCOME TARGETED	ACTIONS	MEASURES	TARGET/GOAL	TIMELINE	ADJUSTED TIMELINE	LEAD	SUPPORT/TEAM	STATUS REPORT Q1
Supportive affordable housing for seniors		Ongoing work by the project team to secure funding and financing. Confirmation of funding from the City of Ottawa is required to ensure feasibility of the project.	REOI from City of Ottawa	April 2024 to see if feasible	Q2 2024		Monique & Cheryl	Cheryl Homuth, BTY, CDC	Submission of REOI to the City of Ottawa Feb. 26th and response expected in April 2024. Phase 3 Site Plan Pre-Consultation requested information from the City to be submitted by March 8, 2024. Preparing for beginning the long-term lending application is ongoing.
		Assess physical space challenges and requirements (education room).					Monique & Cheryl	Cheryl Homuth, BTY, CDC	Common spaces are being finalized by the design team.