



Continuous Quality Improvement Initiative Report March 2025

Designated Lead

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Strategic Framework 2022 – 2026

After more than 150 years of community service, we at St. Patrick's Home understand quality of life means something different for everyone. That's why we build unique, individual relationships with each of the residents of our Home: to appreciate what they value so we can meet their needs and respect their choices.

We know from experience that providing quality care and support is a collective effort. When staff, volunteers, residents, families and friends work together, our mission-driven non-profit organization is empowered to make a real difference in people's lives and throughout our community.

OUR MISSION

Collectively, our foundation, purpose and vision capture our mission of care for the people we serve.

OUR FOUNDATION

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

OUR PURPOSE

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

OUR VISION

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

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.

OUR STRATEGIC PRIORITIES

Strategic Priority 1

The best possible quality of life for every resident

Outcomes

Our care is guided by residents’ preferences and needs for physical, emotional, social, spiritual, and psychological wellbeing.

Our flexible processes and ways of working accommodate different and changing needs.

Everyone in our St. Patrick’s Home family has greater opportunities to engage with each other and with the wider community.

Strategic Priority 2

Consistent, person-directed, quality care and support

Outcomes

We match our level of care to residents’ individual needs and strive to always provide the best-quality care possible.

Staff feel equipped and empowered to provide quality person-directed care.

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

Everyone works together in each resident’s best interest — families, friends, staff, volunteers, residents themselves and/or their substitute decision-makers.

Strategic Priority 3

A purposeful partner in the health system

Outcomes

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.

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.

Strategic Priority 4

Supportive affordable housing and services to meet community needs

Outcomes

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.

We develop our expanded campus thoughtfully, minimizing disruptions and creating new benefits for our Home and the broader community.

We secure the funding needed to fulfill our housing plans and provide associated supports.

Quality Improvement Plan (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 priorities;
- 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;
- Areas of risk as identified through the HIROC Insurance Risk Management Program.

In alignment with Ontario Health's 2025/26 Quality Improvement Plan (QIP) priorities—Access and Flow, Equity, Experience, and Safety—St. Patrick's Home of Ottawa is implementing key initiatives to enhance residents' quality of life:

- Reduce the incidence of new Stage 2-4 pressure ulcers, aiming to lower the current RAI-MDS indicator from 4.2% to the provincial average of 3.2%.
- Expand EDIA-R (Equity, Diversity, Inclusion, Anti-Racism) and ICS (Indigenous Cultural Safety) training, ensuring 15% of staff who have not yet received this education are educated.
- 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 48.28% to 70%.

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

In addition to our QIP, 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 Strategic Framework. The Implementation Plan is updated annually based on the priorities and what is achievable. A Status Report of the 2025 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 will also be posted on our website.

The Quality Committee oversees all quality improvement activity in the Home. The committee receives updates from the Home's committees, reviews program evaluations and provides feedback where required.

One of the key tools used in quality improvement at St. Patrick's Home is the Plan-Do-Study-Act (PDSA) cycle. The PDSA cycle is an iterative, four-step model that supports continuous improvement by testing small changes, measuring their impact, and refining approaches before full implementation.



The PDSA cycle consists of the following steps:

Plan – Identify the issue, set objectives, and develop a strategy for improvement.

Do – Implement the plan on a small scale and document any challenges or unexpected findings.

Study – Analyze the results, compare them to initial expectations, and determine effectiveness.

Act – Make necessary adjustments, expand successful strategies, and prepare for the next cycle.

This cycle allows the organization to trial solutions in a structured way, measure their effectiveness, and refine them based on real-world data. Many successful improvements go through multiple PDSA cycles before full implementation, ensuring that changes are well-tested and sustainable. By incorporating the PDSA cycle into quality improvement initiatives, St. Patrick's Home fosters a culture of continuous learning, adaptability, and evidence-based decision-making, ensuring the best possible care and services for residents.

Resident and Family Quality of Life Survey

St. Patrick's Home of Ottawa started using the International Resident Assessment Instrument (interRAI) Long Term Care (LTC) Quality of Life (QOL) Instrument in 2019 to survey residents on their quality of life. The survey is a standardized tool used to better understand how the people who live at the home experience life. Using this survey enables St. Pat's to compare the quality-of-life ratings from our residents to benchmark from other LTC homes across North American and Europe. In addition, the QIP uses questions from the survey as a measurement of quality improvement work outcomes.

In 2024 we decided to do the survey on a rolling, monthly basis. The survey opened on April 1, 2024 and closed on October 31, 2024. In years past, we would do the survey over a two-week period, which only allowed us to talk to a certain number of residents over a short period of time. The results assisted us in identifying areas of improvement for both our 2025-26 QIP and Implementation Plan. These areas will be further explored using a targeted approach by having discussions with small groups of residents on the home areas that scored the lowest on those questions.

The Family Quality of Life Survey had a response rate of only 20%, which presents a challenge in drawing meaningful conclusions from the data. With such a low participation rate, the results may not accurately reflect the overall experiences and perspectives of families, making it difficult to use the data in a way that truly informs quality improvement efforts. For this reason, the Family QOL Survey results will not be shared.

While we were unable to gather sufficient data through this survey, we remain committed to engaging families in meaningful discussions about quality improvement. Moving forward, we will explore alternative approaches to gathering feedback and strengthening family involvement, ensuring that all voices are heard and incorporated into our ongoing improvement efforts.

The summary report for the Resident QOL Survey will be reviewed by the Board of Directors in March 2025 and then shared with Residents' and Family and Friends Councils in April 2025. Once finalized they will be posted on our website and in the Home for staff, residents and families.

Partnering and Relations

We are committed to ensuring that staff, residents and caregivers have a voice and input into everything we do in the Home. We are doing this by ensuring there is a Residents' and Family and Friends Council representative on all committees and quality improvement project working groups. 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. These include:

Evolving Person-Directed Meal Service: This project focuses on transforming meal service by integrating resident preferences and feedback into dining experiences. Using Quality of Life (QOL) survey data, we are identifying gaps and barriers, conducting process mapping, and implementing Plan-Do-Study-Act (PDSA) cycles to refine the meal service. The updated approach will be rolled out one home area at a time, ensuring a consistent, resident-centered dining experience.

Person-Directed Recreation and Leisure Program Project: The Person-Directed Recreation and Leisure Program Project has moved from process mapping and assessment to action planning in 2025, embedding a resident-directed approach into activities. This includes integrating a new recreation philosophy, refining calendars to balance structured and unstructured time, quality improvement and fully utilizing Activity Pro and Point Click Care for charting and engagement tracking. Action planning for 2025 will focus on implementing identified improvements, enhancing interdisciplinary collaboration, and strengthening resident involvement in the planning process to ensure programs reflect their interests and preferences. The next phase will emphasize measuring satisfaction, refining strategies based on data, and maintaining a flexible, inclusive, and resident-driven program.

Quality Improvement Program: In 2025, a Home-Wide Quality Improvement Program will be re-developed to drive continuous improvement across all departments, enhancing resident care, staff performance, and operational efficiency. The program will focus on standardizing best practices, strengthening interdisciplinary collaboration, and leveraging technology for real-time data tracking. Key priorities include enhancing audit processes, implementing LEAN methodologies, and expanding resident and staff engagement in quality initiatives.

InterRAi and RNAO Best Practices integration with Point Click Care: Our home is one of the early adopters of the new Provincial assessment tool and have as well decided to move forward with the integration of best practice assessments within our documentation system called Point Click Care. The decision to move forward with both projects going live April 1, 2025 was to streamline change management and workflow. This is a whole home endeavour involving all departments.

St. Patrick's Home is planning to build a 133-unit apartment building that is targeted to be affordable for seniors. Catholic Health Sponsors of Ontario (CHSO) is the sponsor organization for St. Pat's and has been very supportive in this project and meets both our Strategic priorities. This will not be a Long-Term Care facility and we are collaborating with the City of Ottawa to improve the housing crisis in our city. We hope to start building in 2025 and are at the financing stage.