

Let's Make Healthy
Change Happen.



Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



3/29/2016

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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Overview

Nithview Community, a division of Tri-County Mennonite Homes, provides services and supports to 97 residents. Our goal is not to be a good home but rather a great home where residents have their needs and wants met, in accordance with their wishes. Our Mission Statement states, "Rooted in faith, we provide leadership in service to seniors by dedicated staff and volunteers." It is our goal that the mission and vision of our home act as a consistent organizational compass, while building on our desire to provide a place for our residents to call home.

At Nithview, our efforts to address quality improvements are based on the feedback we receive from the residents who live in our home, from their families, from those who are significant in their lives, from feedback from staff surveys, board and constituency feedback and from inclusion of local and provincial initiatives.

Nithview Community is committed to ensure that we follow best practices in seniors' care. Our programs for skin and wound care, incontinence, falls reduction, dementia care and medication use within the homes are actively monitored, with changes and modifications implemented in order to meet the needs of residents who entrust us with their care.

Several years ago, the Ministry of Health and Long-Term Care provided additional funds for meeting the needs of residents who experience challenges that play out in the behaviours they exhibit. The Behavioural Supports Ontario (BSO) Program is staffed by an RPN and a PSW on a part-time basis, from within our home. The BSO Program helps to develop appropriate supports that are beneficial to residents referred to the program, educates staff on strategies and supports to meet the individual residents needs, and builds overall capacity with the entire Nithview team, with the goal of supporting the resident in the most effective manner.

In the coming year, Nithview will focus our prioritized initiatives, linking them to quality indicators specifically recommended by the Ministry of Health and the Waterloo Wellington Local Health Integrated Network. We also look at ways we can build our capacity by: partnering with other organizations; networking with other providers, thus assisting us in implementing best practice; identifying opportunities for new initiatives; and facilitating opportunities for sustainable and pro-active improvements in quality care.

QI Achievements From the Past Year

This year Nithview focused our attention on making a difference for our residents with dementia. The success that we experienced came in several ways. The first success was through our efforts to reduce the use of anti-psychotic medication. Through the concerted efforts of our BSO Team, our physician and our pharmacist, residents who were on an anti-psychotic medication were regularly assessed, looking for ways to reduce the use of these medications. Multidisciplinary monthly meetings were held with our staff, to review each resident supported by our BSO Team, identifying strategies that could improve their quality of life, reduce the need for inappropriate use of anti-psychotic medications and increase the use of other measures. We had set a high target for ourselves this past year. While we did not achieve our personal goal, of only 16% of residents without a diagnosis of psychosis on anti-psychotics, we continue to be below the WWLHIN and Provincial benchmark, and we intend to strive for 16% in the coming year. Another initiative that we implemented this year was our iPod Program. Through our learning of the Music & Memory program, we have made iPods available to residents, recognizing that music has a special significance for some residents, helping to

reduce or prevent escalation of behaviours. Currently, 10 residents are part of the program and we are planning to purchase more iPods to continue making a difference for our residents.

This year, the BSO Team created a room which has been referred to as "The Sunshine Room", which is painted a bright yellow, and is decorated with items that would remind a person of years gone by. This room provides a resident the opportunity to water plants, tinker with "John Deere" trucks, hang some laundry, work on a puzzle or play a game of crokinole. This room's activities provide an opportunity to reminisce, providing meaningful memories and quality time for many of the Nithview

Integration and Continuity of Care

At Nithview we worked with many partners from CCAC, local hospital, Community Care Concepts, St. Joseph's Hospital (BSO Program) and other care facilities, to ensure continuity of care for our residents and individuals who call Nithview their home. During 2015, we tracked the number of residents who were transferred to hospital and were able to maintain our previous results, demonstrating our ability and readiness to support our residents at Nithview, while avoiding unnecessary transfers to hospital.

During the course of the year, Nithview met on a regular basis with the Waterloo Wellington Long Term Care Network, which is a group of private and not for profit Long Term Care providers. Through this partnership, we looked for solutions to common barriers in order to ensure quality care for residents.

This year, Nithview Community, in partnership with Parkwood Mennonite Homes and Fairview Mennonite Homes, hosted the Canadian Mennonite Health Assembly. This conference provided the opportunity to bring together faith-based organizations from across Canada, to discuss proposed legislation related to assisted suicide and, more significantly, how to support residents who are palliative and/or at end of life.

During 2015, Nithview initiated a monthly education series, with an open invitation to the surrounding community. New Hamburg is home to several adult lifestyle communities, in addition to the retirement community of Nithview. Presentations were intended to focus on topics that may be of interest to seniors, such as access to supports and services for seniors providing resources, dementia, and elder abuse, with speakers from other community partners such as CCAC, Alzheimer's Society and Waterloo Regional Elder Abuse Committee. These events were well received and we look forward to offering another educational series in the coming year.

Engagement of Clinicians, Leadership & Staff

In November 2015, Nithview's Director of Recreation and Volunteer Services attended the "Building Momentum, Leading Change in Long Term Care" conference. This conference, hosted by the Bruyère Centre in Ottawa, provided workshops challenging the participants to consider new or innovative ways of improving the quality of life of residents. The conference provided opportunities to network with other change-makers in the field.

In 2015, the Board of Tri-County Mennonite Homes, the corporate entity that oversees Nithview Community, Aldaview Services, and Greenwood Court, established a Quality and Risk Management Committee. This board committee includes leadership from Nithview and Greenwood, several board members, a staff member from one of the divisions, the organization's pharmacist, and a community member - a retired RN instructor. This committee has oversight for reviewing quality indicators, QIP

review, and other risk and quality indicators. This has had a significant impact in monitoring and ensuring Nithview's focus on quality care for our residents.

Resident, Patient, Client Engagement

One of our objectives in 2015 was to establish ourselves as a welcoming home. Our "Welcome Home" task group reviewed recommendations from the family survey, conducted in the fall of 2014, and feedback from our residents, in regards to our admission process. One of the initiatives of the committee was the recommendation of a Resident Life Coordinator. The Resident Life Coordinator has helped to lead each resident's move into Nithview, ensuring the experience is resident focused and seamless, while creating a positive introduction to life at Nithview. New residents and their families are invited to complete a survey, following the admission process, so we can evaluate our efforts and improve on creating a positive experience during what can be a stressful time.

A new process, for conducting our annual resident survey, was implemented during 2015. In the past, we circulated a survey to all residents but found families were often completing the survey on their behalf. The new process now involves a face to face meeting with each resident who has a CPS score of 3 or less, to assist in having our residents complete the survey. While a number of questions were asked as part of the survey, this past year we rated our success on the question, "Would I recommend this home to others?" We will continue to incorporate a question from the survey as one of our measurables in the 2016 QIP.

Nithview has a very vibrant Resident Council which meets on a monthly basis. Their input has made lasting and significant contributions to the life of residents at Nithview and we value the contribution they make in ensuring Nithview is their chosen home.

Other

During 2015, Nithview experienced the unfortunate loss of Dr. Rainham, our home physician and Medical Director for over 10 years. The Medical Director plays a significant role in shaping the direction of the care and quality of life for residents. In January 2016, Nithview welcomed Dr. Barbara Cowing as the Medical Director. Together with Dr. Cowing, we look forward to strengthening our role as care providers for residents who call Nithview their home.

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

Board Chair / Licensee or delegate _____

Administrator /Executive Director _____

Quality Committee Chair or delegate _____

CEO/Executive Director/Admin. Lead _____ (signature)

Other leadership as appropriate _____ (signature)

