Tri-County Mennonite Homes

Continuous Quality Improvement Initiative Report

Greenwood Court

Designated Lead for Greenwood Court –

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Continuous Quality Improvement Priorities for 2024-2025

OVERVIEW

Greenwood Court is a community of care located in Stratford, Ontario. Greenwood Court includes 48 Long Term Care rooms that are divided into two neighbourhoods: Heritage Neighborhood (15 rooms) and the Colonial Neighborhood (33 rooms) where residents receive daily support for their individual care needs.

Greenwood Court, Stratford Ontario (a branch of Tri-County Mennonite Homes) is happy to share its 2024/2025 Quality Improvement plan. In April of 2022, the Fixing of LongTerm Care Act came into force. Our obligations are related to the continuous quality improvement initiative and resident and family/caregiver experience survey intended to drive improvements in quality of care and resident quality of life by strengthening the voices of long-term care residents and improving transparency.

Greenwood Court is one of 3 homes within the Tri-County Mennonite Homes organization, and we share the same mission statement of “Making everyday matter”. Greenwood Court aims to make everyday matter by striving for high standards of care and by remaining focused on quality initiatives. Our home aligns with provincial programs and current needs of our diverse resident population. We deliver these quality initiatives by promoting individualized and unique approaches to resident care needs and by creating positive experiences for residents, families, team members and community partners.

Greenwood Court is proud to be a predesignate home for RNAO Best Practice Spotlight Organization, as we continue to implement best practice guidelines within our home. This experience allows us to build and develop community connections. Furthermore, it allows us to exchange knowledge across the health care sector, to obtain clinical studies, develop practices and to improve our residents daily care outcomes.

By partnering with our external supports, Greenwood Court strives to implement innovative solutions to meet resident and family needs, with a long-term goal of working with the RNAO to apply and sustain Best Practices within the organization. Greenwood aims to provide current and comprehensive recommendations for resident and family centered care, based on the latest RNAO Best Practice Guidelines.

ACCESS AND FLOW

Greenwood Court aims to provide residents in accessing the right care in the right place at the right times. Greenwood Court actively collaborates and works alongside all community partners to ensure the most appropriate care is delivered to our residents, at the most appropriate time and place.

Our home applied for local funding. We will utilize these opportunities to establish internal resources and expertise to avoid unnecessary hospitalizations and aid the flow of the healthcare system. We enhance out teams' knowledge and skill offering the following education opportunities Fundamentals in Palliative Care, BPSO Championship training, GPA, UFirst, Acquired brain injuries, Personality disorders and Leadership in Senior Living.

Greenwood Court has maintained strong partnerships with Registered Nurses Association of Ontario, Canadian Mental Health Association, Dale Brain Injury, Alzheimer's Society, Achieva Physio Therapy, Ontario Health, OHAH, ODSP, CRA, Ministry of Long Term Care, Perth health Unit, IPAC Ontario Health Team, Canadian Institute Of Health Information, St. Joseph's Pain and Symptom Management, Wellness and Mobility, One Crae, Medigas, Whiter Smiles Dental Health Clinic, County Wide Foot Care Services and MediSystem Pharmacy.

Supported clinical education within the home – Registered staff meeting/education – Continence Care by Prevail; PSW training regarding documentation, care plans and Kardex; Chemical training provided by Diversey and Holland, CPR training, Fostering well-being through leadership series, inspiring psychological well-being, Parkinson's disease in education, Naloxone education.

• Greenwood continues to increase the awareness of abuse and neglect in LTC. Re-education provided annually during our annual education days.

• Facilitating positive transitions into LTC - Clinical Pathways admission assessment has been a successful tool when a resident has moved into our facility. This tool allows staff to ask both the resident and loved one's questions regarding their daily activities and what their likes and dislikes are. Gives a broader picture of who this person is.

EQUITY AND INDIGENOUS HEALTH

Greenwood Court commits to continuing care to share cultural awareness and honor equity, diversity, and inclusion within our home. This was met by providing annual education on diversity, equity and inclusion. Greenwood Court is proud to promote indigenous lifelong reconciliation by including a Knowledge Keeper and Elder of the Anishinnaabe Turtle Clan to provide education and cultural support to residents and team members within the home.

The Leadership team of Greenwood Court also completed Ontario Health's First Nations, Inuit, Metis and Urban Indigenous Health Framework education to share and promote cultural awareness. Greenwood Court supports the needs of Indigenous cultural practices of residents and team members within the home.

We adjusted our internal admission process to include cultural and diversity preferences. Information is gathered and determined via "All About Me", P.I.E.C.E.S. assessment, Resident Centered care Assessment, Spiritual Assessment and during Interdisciplinary Care Conferences. We are excited to celebrate our first annual Multicultural Festival, Pride month, Summer Carnival, Diwali Festival, and Christmas Bazaar.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Greenwood Court completes annual Long Term Care Surveys to residents and families as part of quality improvement plan. The responses are gathered and included in our action plans.

Through the RNAO best practice guidelines for Resident and Family centered care, Greenwood Court updated the admission process to include personal desires into daily activities. These implemented practices provide opportunities for residents and families to share lifestyle preferences, personal routines, and unique details of themselves that they would like to share.

An annual survey for LTCRH and Independent living was completed by the residents, their families and caregivers to measure their experience with the home and the care, services, programs, and goods provided by the home. Key findings – in general, respondents are happy with their residence and services offered by the home. Respondents rated staff as approachable and friendly across all departments.

Survey results were shared with Residents Council President May 2022 and in July 2025b with Resident Counsil action plan was shared.

Key areas of success were as follows:

• Long term staff are wonderful and very caring

• Staff are friendly and responsive and genuinely care about the residents. • Personal Support Workers provide compassionate care to them/the resident.

• Special meals on special holidays really make them (residents) excited.

• Families/Residents feel supported by the staff and organization.

Key areas we strive to improve on include:

• Improve the experience of dining.

• To provide activities tailored to all residents. Residents have shared positive comments about the quality of care the TCMH staff provide, reflecting the rating that PSWs are respectful and provide compassionate care: PSWs are professional and respectful to family – staff show care and help family solve concerns. One respondent's comment reflects and summarizes well what many other respondents have highlighted about all staff: "feel they (staff) are asked to do the impossible with the amount of care the residents actually need. They are only given time for essential needs and even that is hard to accomplish, with no extra quality time to spend with residents. Do appreciate the care of the staff so much, they are quality people."

PROVIDER EXPERIENCE

Greenwood Court is partnered with International non profit organizations such as Talents Beyond Boundaries and CNO's Supervised practice Experience Partnership. These partnerships provide employment opportunities for individuals with clinical experience and education. Greenwood Court also partners with PREP-LTC for preceptorship within the long term care sector to promote recruitment and retention.

Along with providing employment opportunities, we were also able to provide temporary housing during transition to Stratford, Ontario.

Career and co-op opportunities are available for students of local high schools, community colleges, and universities for student placements (NP's, RN's, RPN's, and PSW's)

PALLIATIVE CARE

Greenwood Court continues to enhance the palliative and end of life care program within the home. Our mission is to enhance the experience for residents and families. We continue to provide education, update internal practices and partner with community providers. Greenwood Court supports residents and families through palliative care experience by providing opportunities for legacy building, emotional and spiritual support and sharing knowledge on what to expect during a loved ones journey. We are honoured to walk alongside with family and residents.

As part of the quality improvement plan, Greenwood Court is focusing on improving the Palliative Approach in the past 12 months and End of Life Care in the last days and hours, to align with RNAO's best practice guidelines.

Greenwood Court adapted internal processes by providing team member education (Fundamentals in Palliative Care, and CAPCE). In addition, we included a Lay Pastoral Minister, and Indigenous Elders/Knowledge keeper/Death Doula as part of our regular staff compliment.

SAFETY

The Interdisciplinary team at Greenwood Court conducts monthly quality meetings that focus on our patient safety. We conduct resident risk assessments. We were accepted into the Medication management ISMP Innovator Home Program. Being part of this program allows us to review medication incident reports and able to initiate medication safety programs. In addition, our Professional Advisory Committee meets quarterly to address and review recently identified risks within the home.

The Senior leadership Team meetings are held twice a month where details of incidents, potential risks and resolutions are shared with sister homes to promote proactive measures and response plans for the identified risks.

2025/2026 Quality Initiatives:

Weekly meetings with MD and Nursing leadership team

- Process Measures – How many residents with sensitive conditions were transferred to the ED in one quarter
- Target for process measure – To decrease ED transfers by 50% by March 31, 2026

Education for residents and family members on health care directives- Pain and symptom management consultant will provide education on healthcare directives to both residents and family members. Education will be held both in person and virtually for a larger audience. Presentation information will be shared with residents and family after education.

- Process measure – Number of residents and family will be offered bi-annually
- Target for process measure -50% of residents will attend and 20-25% of family members will attend education by March 31, 2026

Indigenous Cultural Awareness and safety Training from Ontario Health. Greenwood Court will deliver mandatory education to all registered team members via online platform. Education to be completed by Dec 31, 2025 by Indigenous Cultural Awareness and Safety Training by Ontario Health

- Process measures -Process includes number of team members that completed the education with certification.
- Target for process measure -100% of all registered team members by Dec 31, 2026

Patient Centred – Implementing the Gerry Application. This platform allows Greenwood Court to improve education for families of loved ones in our home. This provides families the personalized insight into well being of their loved ones. Loved ones will be able to receive real time communication regarding recreation calendar events, medication lists, and vital signs for upcoming appointments. A platform, in real time between family members especially for those who are a lengthy distance away. LTC Coordinator will collect number of families who are participating quarterly and report to PAC committee – family and resident feed back.

- Process measure- Number of families that use the Gerry app quarterly
- Target for process measure – 50% of residents utilizing it with family by Dec 31, 2025

Diversity and Inclusion in Bathing Practices – Method- Collecting information from residents to create a personalized bath care routine that aligns with their personal care preferences. This data is collected on admission, at care conferences and quarterly by BPSO Champion PSW. The information is added to the resident's care plan for all team members to access. BPSO lead will report number of admissions, number of residents, number of bath refusals in one quarter and and will be reported to PAC Quality.

- Process measure – Number of admissions, number of bathing refusals.
- Target for process measure – 100% admissions will have personalized bathing routines on care plan by March 31, 2026

End of Life Wishes – Methods- Upon admission, quarterly, annually and care conferences, residents are encouraged to share wishes and spiritual practices of end of life care. This information is collected by LTC Coordinator, Recreation Coordinator and Spiritual Care Team and added to the resident's care plan.

- Process measures – End of life Focus in the Care Plan. All residents care plans will have End of Care focus.
- Target for process measure – To have 100% of all residents have wishes documented by June 30, 2025

Therapeutic relationship building between resident and caregivers and empowering residents. - Methods -Education to staff based on establishing therapeutic relationships based on trust, sympathetic presence, and respect.

- Process measures - Video education to be added to Serge Learning Platform for staff members to complete
- Target for process measure – 100%of Staff will complete education on Serge Learning by Nov 30, 2025

Promote resident safety – Methods – Implement a cue card for every resident in their room, indicating "If you feel unsafe, please call 519-273-4662 ext. 3302. Cards to be placed by bedside on resident's nightstand table to be readily available. Cue cards will be used to promote safety and empower their voice.

- Process measures -Executive Director will report to quarterly quality meetings number of calls received from the residents.
- Target for process measure – Number of found infractions in one quarter/reported critical incidents to the ministry by March 31, 2026.

Providing Falls Intervention and Management Education – Methods – Education to be provided to all departments. Focus on education is on Purposeful Rounding and importance of restorative care to maintain strength and mobility. Education will be provided quarterly throughout the year in person.

- Process measures – Process measure will include the number of staff that demonstrates uptake of education documented per quarterly education training.
- Target for process measure – 100% of all team members will have completed the education by March 31, 2026.

Implementation of video surveillance in resident's room with consent. – Methods – Video surveillance will be used as an alternative method for falls intervention if all other interventions are ineffective, or if a resident is identified as exhibiting sensory overstimulation to fall alarm systems. The video surveillance will include 360-degree live feed camara that will connect to nursing work phones and will provide alerts/notifications of movement. This method will alert team members promptly and decrease severity of injuries. Effectiveness of the method will be reviewed quarterly at quality meetings based on severity of injuries (significant health status change) sustained from falls.

- Process measures – Monitor number of significant health status changes related to falls.
- Target for process measure – To decrease residents who fell by 10% and decrease number of significant health status changes related to falls by 50% by March 31, 2026.

MD to attend quarterly antipsychotic medication reduction meetings.

Methods -Method includes MD attending with Pharmacist and ADOC at quarterly meetings to review current residents who received antipsychotic medications. This will be reviewed at quarterly quality meetings.

- Process measures – For MD to attend 4 quarterly meetings with Pharmacist and ADOC.
- Target for process measure – For MD to attend 100% of quarterly meetings by March 31, 2026.

Education on antipsychotic medication for registered staff and medical director. – Methods – Pharmacist to provide education to registered staff on appropriate antipsychotic medication administration to residents in LTC home. Will invite MD to attend Registered staff meetings.

- Process measures – Education to be provided to MD and registered staff in a registered staff meeting twice annually.
- Target for process measure -80% of all registered staff to receive education by March 31, 2026.