Making Every Day Matter

200 Boullee Street New Hamburg, ON N3A 2K4 Phone: 519-662-2718

FAX: 519-662-2284 www.tcmhomes.com

Nithview Community

Continuous Quality Improvement Report- Interim Report

Designated Lead for Nithview Community: Nancy Hilborn, RPN

Quality Improvement Lead, RAI Coordinator.

Quality Priorities for 2022/2023

Nithview Community, a branch of Tri- County Mennonite Homes is pleased to share it's 2022/2023 Quality Improvement Plan. With the impacts of the COVID-19 pandemic and increased public attention on the Long-Term Care Sector, aligning our mission, visions, and values with quality improvement is a paramount focus.

Along with the entire Long-Term Care Sector, Nithview was faced with new regulation as a result of what was learned throughout the COVID-19 pandemic. Our focus continues to be "Making Every Day Matter" for our residents, families and those who work within our Community. We strive to continually meet the regulation using innovative ideas, all well facing healthcare worker shortages. Nithview Community is committed to continued partnership with our resident's, families, employees, stakeholders, community, and external resources to implement our quality initiatives with a focus on person and family centered care. Our quality improvement plan aligns with TCMH's strategic plan and values.



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In 2020, Nithview entered the Best Practice Spotlight Organization Initiative through the RNAO,

a three-year designation program. In our first year of this initiative, Nithview utilized resident

discharge surveys, GAP analysis, and information from residents' council, to develop our focus

priorities within this initiative. These best practice priorities included preventing falls and reducing

injuries from falls, person, and family centered care, and preventing and addressing abuse and

neglect in older adults. To date, Nithview is currently in their third year of the BPSO spotlight

initiative, continuing to adjust and focus our quality objectives to improve our policies and

procedures. Our quality objects for 2022/2023 align with person and family centered care and

addressing and preventing abuse and neglect.

Quality Objectives for 2022/2023

1. Enhancement of our palliative care program with a focus on person and family centered

care.

• Reintroduction of the meal and hospitality carts for palliative residents

• Reimplementation of the Honor Guard after a resident has passed.

• To determine how long-term care families defines palliative care.

• Identify and determine what are positive and/or negative "lived" experiences of

palliative care.

• Identify the barriers, gaps in knowledge among registered and non-registered.

staff, and assess their understanding of the family (palliative) lived experience.

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2. Increasing Awareness of Abuse and Neglect in Older Adults

- Review and update organizational policy surrounding abuse and neglect.
- Improving awareness of the implications of social isolation related to isolation practices for infection control.
- Heighten staff awareness around abuse and neglect of older adults by providing staff education to include further knowledge of the different types of abuse, employee's duty to report abuse, and promotion of staff self-care practices.

3. Facilitating positive transitions

- Implementation of clinical pathways which will provide and enhance our admission assessment, improve navigation and usability which will allow the user further development and improve admission care plans.
- Creation of a Welcome Basket to be given to all new admission on day of arrival to Nithview.
- Newcomers Tea- a welcome tea that will be held every 2-3 months for new residents and family members, who are admitted within that time, providing them an opportunity to meet the leadership team and each other.

Nithview Communities process to continuous quality improvement includes the following:

- Implementation of the Quality Committee whose focus is on current and future quality initiatives and establishing awareness throughout the organization.
- Develop goals and action plan through:
 - o Review of organizational policy and procedures in each focus area.



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- Policy and procedure comparison with the most up to date best practices guidelines.
- Review of resident and family satisfaction, admission, and discharge surveys.
- o Review of quality indicators and NQUIRE data.
- Staff experience survey results
- Collaboration with external partners
- Identification of individuals involved in goals and implementation of action plan.
- o Set timelines for development and implementation.
- Implementation of projects aimed at achieving projected outcomes.
- Evaluation of progress and outcomes and adjusting as necessary.
 - Evaluation through resident outcomes noted in most recent quality indicators and NQUIRE data.
 - Evaluation through resident, family and employee feedback through survey development.
 - O Continued Quality Improvement Team meetings focusing on current status of changes, current outcomes and need for any adjustments.
- Recognition and communication of results.
 - Creation of quality improvement communication board to post current goals and outcomes.



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- o Communication via email to families and other stakeholders
- Presentation of current goals and outcomes at staff meetings, resident, and family council meetings.
- Use of staff departmental communication books
- Sharing action plans and results through collaboration with BPSO initiative.

Nithview Community's quality improvement plan has been designed to comply with Ministry of Health and Long-Term Care guidelines. We will use innovative ideas, despite the challenges of today's world. Nithview is continuing to close gaps in practices, through the BPSO initiative. Some of our major focus will address person and family centered care, prevention of resident abuse and neglect, and palliative care. Nithview Community continues to challenge our residents, employee and students to achieve their fullest potential and respond to new process with curiosity, innovation and ingenuity, all the while "Making Every Day Matter".