

Ehatare Nursing Home

CONTINUOUS QUALITY IMPROVEMENT

REPORT

October 1, 2024

Committees & Other members	Leads and members
<p>Executive Director (ED) Administrative Assistant (AA) Director of Care (DOC) Medical Director (MD) ADOC, RAI & Quality Coordinator IPAC/BSO Activity Director Registered Dietician (RD) Food Service Manager (FSM) Environmental Service Manager (ESM) Physiotherapist PT) Home Pharmacist</p> <p>Programs Leads:</p> <ul style="list-style-type: none"> • Fall Prevention • Continence • Pain • IPAC/BSO • Skin & wound care /Palliative • Resident council president • Family council president • Member of Personal Support Worker (PSW) 	<p>Veronika Viinamae Praneetha Jayatunge Tiina Kumpunen Dr. Farah Ali Manjula Sivakumaran Sanith Khieu Janne Laanemaa Josie Spano Maria Victolero Brent Richardson Ramakrishnan Rajeswaran Shiela Sombilon</p> <p>Thava Nesarajah Pat Thani Angela Illano Sanith Khieu Manjula Sivakumaran Elizabeth Tamm</p> <hr/> <hr/>

STAKEHOLDERS ENGAGEMENT AND INTERDISCIPLINARY MEETINGS

COMMITTEES / MEETINGS	FREQUENCY OF MEETING	ATTENDEES
PROGRAMS COMMITTEES (Fall, Continence, Pain, IPAC, BSO, Skin & wound Care, Palliative, Dehydration)	MONTHLY	<ul style="list-style-type: none"> DOC, Committee Leads, Departmental Managers, Nursing staff (RN/RPN/PSW)
BSO COMMITTEE	MONTHLY	<ul style="list-style-type: none"> SHN-BSO TEAM (GMHOT, PRC), BSO Lead, DOC, Departmental Managers, Nursing staff
IPAC HUB	Bi-WEEKLY	<ul style="list-style-type: none"> SHN-IPAC HUB, IPAC LEAD
TOTAL QUALITY MEETING (TQM)	QUARTERLY (January, April, July, October)	<ul style="list-style-type: none"> ED, Admin. Assistant, DOC, ADOC, RAI & Quality Coordinator, IPAC & BSO lead, Departmental Managers
CONTINUOUS QUALITY IMPROVEMENT (CQI)	QUARTERLY (February, May, August, November)	<ul style="list-style-type: none"> ED, Admin. Assistant, DOC, MD, ADOC, RAI & Quality Coordinator, IPAC & BSO lead, Departmental Managers, Home Pharmacist, Resident Council President, Family Council President, Member of Personal Support Worker (PSW)
PROFESSIONAL ADVISORY COMMITTEE (PAC)	QUARTERLY (February, May, August, November)	<ul style="list-style-type: none"> ED, Admin. Assistant, DOC, MD, ADOC, RAI & Quality Coordinator, IPAC & BSO lead, Departmental Managers, Home Pharmacist, RD, PT, SHN-IPAC Practitioner HUB, TPH Representative
JOINT HEALTH & SAFETY COMMITTEE (JH&S)	QUARTERLY And as needed	<ul style="list-style-type: none"> ED, Chair, Co-Chair, FSM, ESM, JH&S Members
RESIDENT COUNCIL	QUARTERLY	<ul style="list-style-type: none"> Residents Invited management team members
FAMILY COUNCIL	Twice a year	<ul style="list-style-type: none"> Family council president, Family members, invited management team members
FOOD COMMITTEE	Twice a year	<ul style="list-style-type: none"> FSM, Residents, other invited staff or management team members

OTHER INITIATIVES/PROJECTS

1. QUATERLY SCORE CARD AND QUALITY INDICATORS (QI) SUMMARY

- Adjusted QIs retrieved from CCRS report, and Score Card developed, posted on the bulletin board, and shared with ED and Board of Directors by Quality Lead

2. Annual Quality Improvement Plan (QIP)

- Annual QIP developed by Quality Lead and ED, approved by board of members, and submitted by April 1st of each year to Ontario Health.
- Posted on our home website.
- Printed copies of QIP posted on the bulletin board and kept a copy in the Red Nursing Home binder.
- Presented to Resident and Family Council meetings.
- Analysed, and monitored the progress of the change ideas of each QI.

3. Quality Indicators for 2024/2025 QIP

- Avoidable ED visits
- Residents fell within 30 days of MDS assessment
- Residents without psychosis who were given antipsychotic medications
- Residents Experience: % of residents responding positively (how wee the staff listen to you?)
- Residents Experience: % of residents responding positively (I can express my opinion without fear of consequences)
- % of staff completed relevant equity, diversity, inclusion, and anti-racism education (new)

4. SATISFACTION SURVEY

1. Families:

- Satisfaction Survey sent to families via email in November of each year
- Results reviewed in the management meeting in mid of January
- Develops an Action Plan to meet the families' recommendations, complaints or concerns.

2. Residents:

- 2 Survey questions from QIP were distributed to residents whose CPS < 3, and results used in QIP each year
- Develops an Action Plan to meet the families' recommendations, complaints or concerns.

5. RNAO – Clinical Pathways Implementation Project (Cohort 6)

- We are in a process of implementing RNAO Clinical Pathways on Admission assessment, Resident and Family Centered Care (RFCC), Delirium, Dementia, Depression, Pain, Falls, Pressure Injury, Palliative and end-of-life care and Continence.
- 2 days educational conference held by RNAO in May 2024
- On going education via zoom meeting
- Go Live date will be on November 25, 2024

6. Long Term Care - Behavioural Support Outreach Team (LTC-BSOT)

- New initiative from BSOT by Baycrest Centre to provide resident centred care for responsive behaviour residents
- First meeting held at Ehatere Nursing Home with our multidisciplinary team and BSOT in June 2024
- On going assistance will be received from BSOT to manage our responsive behaviour residents as required