**Quality Improvement Plan (QIP)** 

# Narrative for Health Care Organizations in Ontario

July 19, 2023





#### **OVERVIEW**

The past year has been one of challenges and obstacles. We continue to work towards increasing the number of hours of care per resident per day. This goal is riddled with challenges that we will work on overcoming in the next year. Staffing has been one of the biggest challenges that is plaguing most businesses since the beginning of the pandemic. In our experience the challenge to staff the facility is like nothing seen before. Recruitment efforts yield very little results and any successful recruitments are very short lived. As a team we will focus on identifying and resolving the barriers to successful recruitment and retention. In an effort to lighten the workload of the PSW's we have looked beyond the normal practice and hired some "home assistants" that will do some of the work that the PSW's do, such as bed making, transporting residents to and from the dining room, putting laundry away etc.

Infection prevention and control has always been a pivotal role in our facility however the emergence of a pandemic made the importance of a solid infection prevention and control program so vital in order to protect our vulnerable residents and our valuable staff. This year we will focus on strengthening the IPAC surveillance, reviewing policies and procedures and gathering data from audits to determine where our strengths and weaknesses lie. We are in the process of hiring a new IPAC lead who will bring enthusiasm and breathe new life in to a very important program. The Ministry mandates surrounding IPAC measures continue to be followed and adjusted as per the guidelines. Staff continue to get tested every time they work and all visitors are tested prior to entering the building. Hopefully we will see some of the mandates loosen up a bit in 2023.

As we move into 2023 we will continue to focus on creating an

environment of inclusion, personalization, resident focused and team-based. Families are such an important part of our home and we want them to feel comfortable leaving their loved one in our care. Friendly Manor has always encouraged families to voice any concerns that they may have. We will continue to build solid relationships with family members as well as community partners. Friendly Manor is looking forward to a major renovation or new build with the addition of 36 new beds. The planning process is in the early stages and will proceed once a structural assessment has been completed this spring.

### **REFLECTIONS SINCE YOUR LAST QIP SUBMISSION**

Our last Quality improvement plan remains a work in progress. Staffing continues to be a major concern. We are struggling with the red tape involved in procuring a Nurse Practitioner. We have made a few changes to our staff orientation program however we still have changes to make. We have made improvements to our communication between staff members with the addition of a isolation board and improved report between shifts. It is our belief that we need to continue to work on all of the initiatives that we put in place last year. Several initiatives hinge upon appropriate staffing levels and this remains a challenge. We were successful with the formation of a family council however the president of the family council is looking to step down since her father passed away last year at the facility.

# PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

We have made a concerted effort to obtain the opinions and preferences from the residents and family members. There were some concerns raised through the family council in regards to the nourishment cart. A survey was developed that contained a lengthy list of items appropriate for nourishment. The survey was distributed by the life enrichment staff to obtain the residents opinions on what they would like to see on the cart. The results were tabulated and the nutrition manager was able to make changes to the contents of the nourishment cart.

We also decided to purchase new furniture for one of our lounges due to the present furniture having tears and posing an infection prevention and control issue. A catalog was taken to the resident council meeting for the residents to decide on what they would like to see in the lounge in regards to seating and tables. The resident also chose the colors of the furniture. We are expecting the new furniture in a few weeks.

Every year the home awards a Humanitarian award for a staff member, volunteer or community partner who goes above and beyond for the residents of the home. The residents are encouraged to nominate individuals and write out why they feel the individual should win the award. The nominations are then given to the Life Enrichment supervisor who presents them to the Residents council and they then choose a winner from the group of nominations.

#### PROVIDER EXPERIENCE

The past year has had numerous challenges related to staffing. It is proving very difficult to hire new staff for all departments and if we are able to hire, retainment is a problem. The staff that we do have are getting burnt out from the increased demands of working short and the demands of families. We have had numerous staff appreciation events, attendance awards and the addition of home assistants to assist in some of the duties of the PSWs however the staff continue to struggle with the increased demands. The permanent wage incentive has proven ineffective in procuring additional staff and has caused animosity between the nursing staff and the dietary and housekeeping departments.

#### WORKPLACE VIOLENCE PREVENTION

The staff at Friendly Manor take workplace violence very seriously. We have a process to identify residents that have the potential for violence or have a high tendency for violence. Staff also report all problems related to bullying and harassment immediately. We encourage staff and other visitors to report any verbally offensive visitors to the nurse in charge and/or management.

Episodes of violence can have detrimental effects on all those involved and can lead to increased absenteeism.

The RAI coordinator fills out a violence potential form that identifies residents who have the potential to be violent. This way we can keep track of all residents with violent tendencies.

The staff feel that we need to make improvements on our policies and procedures for verbally aggressive visitors. Staff feel threatened and overwhelmed by family members or visitors who present themselves in an aggressive manner. Family members attempt to cope with the change in condition of their loved ones and on occasion their coping turns into constant internal turmoil resulting in lashing out at the staff in an effort to gain some control of their situation.

The plan for the coming year will be to provide teaching to staff in order to successfully diffuse situations and understand the reason for the family members verbally aggressive behavior. The staff will also receive education to aid in identification of potential family conflicts before there are problems between staff and family members.

#### **PATIENT SAFETY**

Patient safety is one of our priorities. We frequently review processes to ensure our residents remain safe. We compete safety reviews on an annual basis for our ceiling lifts to ensure that they are safe to lift residents. This is a crucial to ensuring resident safety as lifts have failed the weight test in the past. The staff check the condition of slings every time that they use them to ensure they are not frayed. Another example of safety checks involves resident equipment which is checked by the staff and our wheelchair supplier.

Patient safety also includes possible physical aggression from other residents. When a resident is identified as having a potential for violence, a behavior care plan is completed with a list of potential interventions to diffuse situations.

Staffing shortages have also posed a potential safety problem. The location of our home in a rural area makes hiring new staff difficult and retaining staff is also a problem. WE have enlisted the help of agency staff however the staffing problems continues.

## **HEALTH EQUITY**

Friendly Manor is located in close proximity to the Tyendinaga Mohawk territory. We are to have indigenous staff as well as residents. The Mohawk cultures are well respected in our home and we have a very good relationship with the Chief of the Mohawk people.

Everyone regardless of sex, gender, income, race or other sociodemographic characteristics, has the opportunity to reach their optimal health.

#### 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 on April 1, 2023

M.Simon, Board Chair / Licensee or delegate

D. Long, Administrator / Executive Director

**D. Long**, Quality Committee Chair or delegate

**S. Maracle**, Other leadership as appropriate