

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 7, 2025

Friendly Manor 😊



Ontario
Health

OVERVIEW

As we move into 2025 we look back and reflect on the past year. It was full of challenges that as a team we continue to work to overcome. Staffing continues to be a huge challenge. This has improved greatly over the last year. We are using much less agency staff at this time as we continue to work towards increasing the number of hours of care provided to our residents. Recruitment efforts continue, with our biggest struggle being hiring RPNs. Our goal is to have RN supervisors on day and evening shifts. To meet this goal we need to hire more RPNs. We continue to look at the barriers to recruitment and retention and try to improve on that as a team. We have developed relationships with some schools and hosted several students. We also provide placement for SPEP nurses. We no longer have our Home Assistants, as we did during COVID. They are greatly missed by the staff and the residents. We currently have 2 General Aides who have decided to change careers and are enrolled in the PSW program through Humber College. They will complete their consolidation at Friendly Manor and then stay on as PSWs. Over the last year we had 2 PSWs complete the bridging program to RPN. They continued to work as PSWs while in school. Unfortunately, they both relocated and are no longer with Friendly Manor.

We have done several renovations in our home over the last year. We updated the walls, handrails and flooring in our hallways and converted our old utility room into a PPE storage room. This has all improved our infection control practices as well as updating our home, making it brighter and welcoming.

Our IPAC Lead recently resigned. We are currently recruiting for this position. Our program has been up and running well. Staff are very familiar with protocols and continue to work within infection control practices.

The Director of Nursing, Nurse Practitioner, Physician and Pharmacist are working together to further decrease our antipsychotic use.

In 2025 we strive to maintain the advances we have made. We have had some leadership changes. Our long time Administrator has retired. The Director of Nursing moved in to the Administrator role and one of our RNs moved into the Director of Nursing Role. As we learn our new roles we continue to focus on maintaining a positive and safe atmosphere for our residents, families and staff.

ACCESS AND FLOW

We have recently hired a Nurse Practitioner that is on-site 3 days a week and working remotely 1 day a week. The NP has been an excellent addition to our team and is currently trialing an on-call roll, worked out with the Medical Director of the Home.

Our IPAC Lead built strong relationships with the local IPAC Hub and KFLA Public Health Unit. The representative from IPAC Hub visits on a regular basis and assists with things such as staff education, program development and audits. While we are recruiting for a new IPAC Lead we can request assistance from these resources if needed.

We continue to host monthly Collaborative Care meetings, involving community partners such as our Psychogeriatric Resource Consultant, Mobile Response Team, Seniors Mental Health Case Manager, our Nurse Practitioner and other staff members. Some changes have been made to the format and we are working on fostering new relationships.

We have a very supportive relationship with our pharmacy. They are very innovative and always working to improve things for our residents. We can reach out and receive support at anytime. Our pharmacists are always available to the registered staff to answer questions and provide recommendations. The pharmacists provide any requested education to our staff. We have a nurse from the pharmacy that comes in regularly and completes audits and provides education to our registered staff.

EQUITY AND INDIGENOUS HEALTH

Friendly Manor is located in close proximity to the Tyendinaga Mohawk Territory. We have Indigenous staff and residents. The Mohawk culture is respected in our home. We have good relationships with the Chief of the Mohawks of the Bay of Quinte. Friendly Manor has a very open hiring process. Qualified applicants are hired regardless of ethnicity. Everyone regardless of sex, gender, income, race or other sociodemographic characteristics, has the opportunity to reach their optimal health. All staff have participated in diversity and racism training. This is also part of our annual mandatory education.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Our annual resident survey was provided to all residents and they were encouraged to participate. Residents were assisted to complete the survey if needed. Family surveys were completed as well. The responses were positive. We have an active Resident's Council, who bring forward concerns they arise. We do not currently have a Family Council but are continually attempting to start one. This past year we had MPP Ric Bresee in to discuss concerns regarding accessibility and transportation. This discussion was helpful in developing an improved relationship with Lennox and Addington County General Hospital.

PROVIDER EXPERIENCE

Over the past year we have been successful in decreasing the amount of agency staff that we have required. Our hiring has been improving, with the exception of RPNs. We continue to offer incentives such as hiring and retention bonuses. We are currently preparing to attend a job fair to attempt to entice staff to our home. We attempt to keep a positive staff morale and to recognize and appreciate our current staff. We do things such as spirit days, special food days, years of service awards and a large annual staff appreciation party. Health and wellness of our staff are promoted with things like a weight loss challenge and a stop smoking program.

SAFETY

Patient safety is a priority for us. We frequently review our processes to ensure our residents remain safe. Safety checks are completed on lifts, slings, wheelchairs and all equipment used. Our pharmacy has a system of reporting medication error and hypoglycemic events. In this system a report is completed that is then automatically sent to the pharmacy, the Director of Nursing and the Administrator. This triggers a conversation with the registered staff. The goal is to develop strategies to ensure the errors don't occur again. Our in house BSO team works with residents with responsive behaviours. We involve our partners from Providence Care when needed. We have a violence awareness program that identifies residents with the potential for violent expressions, to attempt to keep our staff safe and visitors.

PALLIATIVE CARE

Friendly Manor has a newly developed Palliative Approach to Care Team.(PACT) This team is lead by our Nurse Practitioner. She has been providing education to the staff and the team. We recently supported one of our residents with Medical Assistance in Dying. Support and education was provided surrounding this death. We have 4 staff currently completing Palliative Care Education. The goal is to have these staff as our Palliative Care Champions. We have recently developed an End of Life Care survey which has been sent out to families who had residents die within the last year. The goal is to receive feedback from the families and improve the care provided to our residents.

POPULATION HEALTH MANAGEMENT

Friendly Manor is part of the Ontario Health Team developed by Lennox and Addington County General Hospital. We collaborate with the IPAC Hub based out of Kingston General Hospital as well as Kingston Frontenac Lennox and Addington Health Unit for all issues regarding infection control and disease prevention. We have recently initiated a STOP program for residents and staff that wish to quit smoking.

CONTACT INFORMATION/DESIGNATED LEAD

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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 **February 28, 2025**

M. Simon, Board Chair / Licensee or delegate

S. Maracle, Administrator /Executive Director

S. Maracle, Quality Committee Chair or delegate

K. Alkenbrack, Other leadership as appropriate
