

Continuous Quality Improvement Initiative Report August 2023

Designated Lead

Fola Akano, Senior Administrator Long-Term Care

2022-2023 Quality Improvements

Please see attached 2022-2023 QIP Progress Report that identifies the actions implemented based on the results of the 2021 Resident Satisfaction Survey, including timelines and outcomes.

2023-2024 Quality Priorities

Please see attached 2023-2024 Quality Improvement Plan (QIP), that focuses on the following priorities:

To increase resident satisfaction re:

- Personal care including bathing, hygiene, safety and comfort, lifting, transferring, etc.; and,
- Staff providing care in a non-rushed manner while considering strengths, preferences and needs of resident allowing them optimal independence at their own pace.

The priorities addressed in the attached QIP were identified by the CQIC based on feedback provided on the 2022 Resident Satisfaction Survey.

The attached QIP outlines the processes for measuring progress and implementing adjustments as needed throughout the year. Progress and adjustments will be reported to the CQIC as needed.

In addition to focusing on the above quality priorities in 2023, Radiant Care is actively working toward getting accredited, which includes reviewing and refining all policies and processes within the home to ensure the highest standards are being met and maintained.

2022 Resident Satisfaction Survey

Survey distributed November 1, 2022 to be completed by November 15, 2022.

Please see attached collated survey results.

Collated survey results were communicated as follows:

- A review of the results was conducted with residents at their Resident Council Meeting of January 30, 2023
- A copy of the survey results were posted in the Resident Resource Binder on March 14, 2023

Records of Improvements

The individuals who participated in evaluations of quality improvements are documented in the following meeting minutes:

- CQIC Meetings
 - o June 10, 2022
 - o January 24, 2023
 - o August 29, 2023
- Falls Prevention Meetings
 - o March 30, 2022
 - o April 30, 2022
 - July 30, 2022 (for June and July)
 - September 30, 2022 (for August and September)
 - December 15, 2022 (for October, November and December)
 - January 31, 2023
 - o February 28, 2023
 - o March 30, 2023
- Resident Council Meetings
 - o January 30, 2023
 - o April 5, 2023
 - o July 28, 2023
- Accreditation Committee Meetings
 - o January 26, 2023
 - o February 1, 2023
 - o February 15, 2023
 - o March 1, 2023

Reference: Continuous Quality Improvement Initiative Report, O. Reg. 246/22, Fixing Long-Term Care Act, 2021

Radiant Care Pleasant Manor

Excellent Care for All

Quality Improvement Plan (QIP)
Progress Report for 2022 - 2023 RC PM Long-Term Care QIP

| Objective | Decrease # of resident falls by December | er 31, 2022. | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|
| Measure/Indicator from 2022/2023 QIP | # of resident falls per month. | # of resident falls per month. | | | | | | | |
| Current Performance as stated on 2022/23 QIP | 8 falls per month (in May). | | | | | | | | |
| Target Performance as stated on 2022/23 QIP | Fewer than 8 falls per month. | Fewer than 8 falls per month. | | | | | | | |
| Final Performance - End of 2022 | falls in November. There was a total of 7 falls for these months was 16. Of the 16 were 9 total falls relating to 3 residents was appropriate fall prevention intervention in | There was a total of 3 falls per the month of December. There was a total of 6 alls in November. There was a total of 7 falls in October. The total number of alls for these months was 16. Of the 16 total falls over the three months, there were 9 total falls relating to 3 residents with a history of falls and has every appropriate fall prevention intervention in place. Therefor we have reached our loal and have improved significantly in reducing the number of falls had at Pleasant Manor | | | | | | | |
| | QIP Progress | | | | | | | | |
| Change Idea | Methods | Progress/Completion | | | | | | | |
| Update Falls Prevention Program Policy & Associated Documents | Update Falls Prevention Program Policy Create supporting documents: 4Ps of Purposeful Rounding reference page Purposeful Rounding Checklist Fall LEAF Program Please Call, Don't Fall cueing sign Fall Response & Documentation Flowchart Risk Factors for Falls | Falls Prevention Policy has been updated to reflect current up to date information Documentation tools have been updated to reflect the policy | | | | | | | |
| Educate front-line long- term care (LTC) staff on Falls Prevention Program (FPP), including Purposeful Rounding and Fall LEAF Program | Post Falls Prevention Education Course (FPEC) on Systems 24-7 Front-line LTC staff to complete FPEC Present FPP information and post education board on floor Post "Fall Response & Documentation Flowchart" on education board and orientation checklist for new Nurses | Systems 24-7 education has been posted for staff to complete In person sessions completed on all floors for staff Information posted in appropriate places for all staff | | | | | | | |

| | Physiotherapy Staff and Hauser's will train front-line LTC staff on | |
|---|--|--|
| Remind residents to use call bell: To get out of bed To use the bathroom To reach for something, or If they have pain or any discomfort | Falls Lead/delegate will post "Please Call, Don't Fall" cueing sign in the room of residents who fall frequently and inform them to use the call bell for the identified reasons Add a Point of Care (POC) task for PSWs to remind residents to use call bell, as per "Please Call, Don't Fall" cueing sign CQC will complete audit of POC reminder task twice a month and | "Please Call Don't Fall" signs have been posted for residents it is appropriate for POC task has also been added for them Audits are completed regularly to ensure staff continue to follow up with these residents |
| Incorporate the 4Ps of purposeful rounding into existing rounds and tasks: Pain Position Personal Needs Periphery | follow up as needed Affix the Purposeful Rounding Checklist to housekeeping carts, snack carts, Therapeutic Recreation (TR) work area, and nurses' station Add Purposeful Rounding to interdisciplinary unit meeting agendas Add a POC task for PSWs to do purposeful rounding for each resident each shift CQC will complete audit of POC purposeful rounding twice a month | Reminder placed for PSWs to complete Purposeful Rounding. It has also been added to the appropriate areas. Purposeful rounding is continuing to be signed off regularly by staff as a reminder |
| Create toileting schedules to decrease falls related to toileting needs | and follow up as needed Falls Lead/delegate will work with staff to create toileting schedules for each section of residents, to be stored in the Personal Support Worker (PSW) binder Add POC tasks for PSWs to toilet residents according to schedule CQC will complete audit of POC toileting task twice a month and follow up as needed | Toileting Schedules continue to be checked and updated with staff assistance from the floor. All residents have task for toileting. Continued follow up with staff occurs approximately biweekly by ADOC to ensure it stays up to date. |
| Identify residents at highest risk of falls | CQC will update Fall Risk Assessment Tool on Point Click Care (PCC) to ensure it accurately captures fall risk | Fall Risk Assessment Tool updated. |

| Reinforce Fall LEAF | Falls Lead/delegate will update Fall | The ADOC has updated Fall LEAF | | | | | | |
|---------------------|---|--|--|--|--|--|--|--|
| Program | LEAF labels in resident rooms to | logos as well as transfer status for | | | | | | |
| | be current | all residents in the LTC. | | | | | | |
| Lessons Learned | The DOCS and ADOC will continue to work with floor staff to implement | | | | | | | |
| Lessons Leanneu | appropriate fall interventions as soo prevent further occurrences. | appropriate fall interventions as soon as possible for new admissions to | | | | | | |
| | • | As residents decline, we encourage and support floor staff to implement | | | | | | |
| | appropriate fall risk interventions wh | | | | | | | |

Radiant Care Pleasant Manor 2023 - 2024 Quality Improvement Plan - Long-Term Care

| AIM | | MEASURE | | | | CHANGE | | | | |
|----------------------|---|---|--|-----------------------|-------------------------|--|---|---------------------|--|---|
| Quality Dimension | Objective | Measure / Indicator | Current Performance | Target Performance | Target Justification | Planned Improvement Initiatives (change ideas) | Methods | Process Measures | Target for Process Measures | Comments |
| Resident | resident satisfaction re: Personal care including bathing, hygiene, safety and comfort, lifting, transferring, etc. | Percentage of residents responding positively (very satisfied and satisfied) to Questions 1 and 7 pertaining to personal care and receiving services in a non-rushed manner | Question 1 63% (5 of 8) positive responses Question 7 88% (7 of 8) positive responses | | performance in other | Staff will use touch, smiling and eye contact to connect meaningfully with residents | Hold an in-service to train and encourage staff to connect with residents in these ways Audits completed and changes made, if needed | Audits | Hold an in-service by March 31, 2023 May 31, 2023 | We chose this objective based on ratings and comments from residents, as identified on the 2022 Pleasant Manor Resident Satisfaction Survey |

Radiant Care Pleasant Manor 2023 - 2024 Quality Improvement Plan - Long-Term Care

| AIM | | MEASURE | | | | CHANGE | | | | |
|----------------------|-----------|------------------------|------------------------|-----------------------|-------------------------|--|---|---|--|----------|
| Quality Dimension | Objective | Measure / Indicator | Current Performance | Target Performance | Target Justification | Planned Improvement Initiatives (change ideas) | Methods | Process Measures | Target for Process Measures | Comments |
| | | | | | | safe transfers - handle with care | Hold in-services using video aids, fact sheets, one-on-one demonstrations and Q&A Audits completed and changes made, if needed | Audits | May 31, 2023 and ongoing May 31, 2023 and ongoing | |
| | | | | | | | Create fact sheet for new and current staff and add to staff communication binder | | May 31, 2023 | |
| | | | | | | member to: reinforce routines support and trains new hires and agency staff advocate for resident care | orientation for new staff GPA Training for float resources | routines documented in departmental meeting minutes Audits of resident care | March 31, 2023 May 31, 2023 and ongoing | |
| | | | | | | needs | Advocate for | completed | Ongoing | |

Radiant Care Pleasant Manor 2023 - 2024 Quality Improvement Plan - Long-Term Care

| AIM | | MEASURE | | | | CHANGE | | | | |
|----------------------|-----------|------------------------|------------------------|-----------------------|-------------------------|---|--|---|--------------------------------|----------|
| Quality Dimension | Objective | Measure / Indicator | Current Performance | Target Performance | Target Justification | Planned Improvement Initiatives (change ideas) | mprovement Methods | | Target for Process Measures | Comments |
| | | | | | | | One-on-one training for lifts and transfers; follow-up demonstrations and re-demonstrations as required | _ | May 31, 2023 and ongoing | |
| | | | | | | | Audits completed and changes made, if needed | | May 31, 2023 and ongoing | |



Resident Satisfaction Survey - Results 2022

One Resident Satisfaction Survey was distributed to each Long-Term Care resident, for a total of 40 surveys distributed. A total of 12 responses were received for a response rate of 30%.

| Personal Care and Medical Issues | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| The personal care received, such as bathing, hygiene, safety and comfort, lifting and transferring, etc., is | | 5 | 3 | | |
| Staff respect my privacy while providing personal care. | 5 | 2 | | | 1 |
| I would rate the medical care, such as treatments, medication administration, etc., as | 5 | 3 | | | |
| How well does the doctor respond to your medical concerns? | 2 | 2 | | | 4 |
| How would you rate the time your doctor takes with you to deal with your medical issues? | 2 | 2 | 1 | | 3 |
| Staff are aware of my personal preferences of routines for waking up in the morning, bedtime rituals and hygiene choices and reflect those in their daily care. | 3 | 5 | | | |
| Staff provide care considering my strengths, preferences and needs in a non rushed manner allowing me the optimal independence at my own pace. | 3 | 4 | 1 | | |
| If applicable, the continence products I use help to keep my skin dry, eliminates soilage on my clothes and fits comfortably. | 2 | 4 | 1 | | 1 |
| How would you rate the quality of the Physio Therapy Services offered at Radiant Care Pleasant Manor? | 2 | 1 | 1 | | 4 |
| I was involved in decisions about care as much as I wanted to be. | 2 | 5 | | | 1 |

- Most staff are nice and know my needs. Some staff (PSWs) really rush me or don't even talk to me
- Some days care is good, some days it's bad depends on who is working a lot of missed

baths

- Some bruising from rough handling when bathing and dressing
- Everyday is different
- We have very good PSWs and some very bad PSWs
- I hardly see the doctor
- Mostly satisfied with care. There are days when I'm not

| Programming and Activities | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| How would you rate the effectiveness of the Resident Council? | | 5 | | | 2 |
| How would you rate the quality of the activities you have been involved in? | 3 | 4 | | | 1 |
| How would you rate the variety of the activities you have been involved in? | 3 | 4 | | | 1 |
| Are the activities meaningful and enjoyable to you? | 2 | 4 | 1 | | 1 |
| Staff are aware of my personal interests and hobbies and facilitate participation in these. | 4 | 3 | | | 1 |
| How would you rate the Chapel Services and Bible Studies? | 1 | 6 | | | 1 |
| How would you rate the 1:1 visitations of the chaplain? | 4 | 3 | 1 | | |
| I am given opportunity and supported in meeting my spiritual needs. | 3 | 4 | | | |

- Enjoy the variety. Recreation staff are friendly and help me with activities like Bingo
- They did a slideshow on my life
- Too many church services a week
- Would like to have more visits with [Chaplain]
- [Chaplain] is fantastic. Recreation staff are nice

| Dietary / Food | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| How would you rate the variety of food offered on our menu? | 2 | 5 | 1 | | |
| The presentation of food is | 2 | 6 | | | |
| How would you rate the temperature of the food when it's received? | 2 | 6 | | | |
| How would you rate the promptness of the meal service? | | 8 | | | |
| How would you rate the seasoning and taste of the food served at Radiant Care Pleasant Manor? | 1 | 6 | 1 | | |
| Ample time is provided so that I may eat my meal at my own pace. | 5 | 7 | | | |
| I am provided with appropriate, courteous assistance with my meals. | 3 | 4 | 1 | | |
| My overall dining room experience (e.g. noise level, table mates, seating and lighting, etc) has been | 1 | 4 | | | 2 |

- Would like a bit more seasoning
- Food comes hot but after waiting for help (sometimes ½ hour), it's cold. Some helpers are better than others
- Some food is great. Some food is NOT
- Too much potatoes and meat
- Most of the food is good. Temperature is fantastic

| Environmental Services | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| Radiant Care Pleasant Manor's response to maintenance issues is | 1 | 6 | 1 | | |
| How would you rate our lighting? | 3 | 5 | | | |
| How would you rate the temperature inside our building? | | 6 | 1 | 1 | |
| How would you rate our building for ease of mobility? | 1 | 7 | | | |
| How would you rate the overall appearance of Radiant Care Pleasant Manor? | | 7 | 1 | | |
| How would you rate the overall comfort of Radiant Care Pleasant Manor? | 1 | 6 | 1 | | |
| How would you rate the suitability of your accommodation? | 1 | 7 | | | |
| How would you rate the laundry service at Radiant Care Pleasant Manor? | 1 | 5 | 1 | | 1 |

Additional comments:

- Find it freezing in here
- Lost a lot of socks
- Find it dim in my room, especially the overhead bed light
- Mostly cold. A couple of scratches on my wall wish would be fixed. Some laundry has been lost and the staff have been good trying to find it

| Staff Communication with Residents & Families | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|---|-------------------|-----------|--------------|----------------------|----------------|
| How would you rate the volume of voice the staff uses to talk with you? | | 8 | | | |
| How would you rate the clarity of speech of the staff? | | 4 | 3 | | |
| How would you rate our body language when we talk with you? | | 8 | | | |
| How would you rate our telephone manner? | | 1 | | | 6 |
| How would you rate the staff's ability to help resolve issues? | 1 | 5 | 1 | | 1 |

- With face masks, loss of hearing, and foreign accents, it can be a challenge to understand
- Staff speech clarity varies widely from person to person
- Hard to hear some staff. I am speaking English but they (PSWs) don't know what I am saying
- Some I can hear, some I cannot! Not always polite

| Administration / Management / Office Staff | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|--|-------------------|-----------|--------------|----------------------|----------------|
| How would you rate management's accessibility for you? | 2 | 6 | | | |
| How would you rate management's responsiveness and ability to address issues or complaints you have? | 3 | 5 | | | |
| How would you rate management's efforts to share information with you? | 1 | 6 | 1 | | |
| How would you rate our office's efforts to provide you with the information you need? | 1 | 5 | | | 2 |
| How would you rate our friendliness? | 3 | 5 | | | |

Additional comments:

- Friendliness: great
- Family feels pleased with efforts to deal with our concerns

| Having a Voice | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|--|-------------------|-----------|--------------|----------------------|----------------|
| How would you rate how well the staff listen to you? | 2 | 3 | 1 | | 2 |
| | | | Ye | s | No |
| I can express my opinion without fear of consequences. | | | 5 | | 1 |

| Recommendation | Yes | No |
|---|-----|----|
| Would you recommend Radiant Care Pleasant Manor to your family and friends? | 7 | |
| | | |

Additional comments:

Not at this time but generally yes

| Overall Rating | Very Satisfied | Satisfied | Dissatisfied | Very Dissatisfied | Do Not Know |
|--|-------------------|-----------|--------------|----------------------|----------------|
| I am treated with excellence, love and dignity. | 3 | 4 | 1 | | |
| Overall, I rate my experience here at Radiant Care Pleasant Manor and the services I receive in all areas as | 2 | 6 | | | |

- Family feels very pleased
- Being treated with excellence, love, and dignity varies widely from person to person
- Depends who is working
- Other residents can be very challenging