

Let's Make Healthy  
Change Happen.



## Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

Radiant  
Care  
Tabor  
Manor

Long-Term Care  
March 2024

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

[ontario.ca/excellentcare](http://ontario.ca/excellentcare)

## Overview of our Organization's Quality Improvement Plan

### Overview

The objective we focused on in our QIP is aimed at fostering a culture of resident centered care related to (1) personal care including bathing, hygiene, safety and comfort, lifting, transferring, etc.; (2) personal preference for care routines; and (3) staff providing care in a non-rushed manner while considering the strengths, preference and needs of the resident in order to allow them optimal independence at their own pace.

Our QIP aligns with the quality objectives of our organization's strategic plan and with our Long-Term Care Service Accountability Agreement (L-SAA). Further, our QIP aligns with provincial and regional strategies of client-centered care as well as Seniors Strategy in the province.

### Reflections since your last QIP submission

Over the past year, we continued to focus the majority of staff time and energy on keeping our residents, staff, visitors and family members as safe and supported as possible. We will continue to focus our quality improvement efforts on specific initiatives to increase resident satisfaction in the area of personal care.

### Patient/Client/Resident Partnering & Relations

We continue to intentionally collaborate with and seek feedback from residents through ongoing Resident Council meetings and our annual Resident Satisfaction Surveys. Upon identifying areas for improvement, we met with the Resident Council which affirmed our proposed focus on increasing resident satisfaction in the area of personal care in the coming year. Staff create an action plan and report back to the Resident Council and Family Council to let them know how we plan to increase resident satisfaction.

### Resident Experience

Based on feedback received from residents, this year's QIP has been created in consultation with our Resident Council in order to increase resident satisfaction in personal care. All other feedback from the Resident Satisfaction Surveys is reviewed and discussed at Resident Council meetings as well as Continuous Quality Improvement Committee meetings to ensure that all concerns are addressed.

### Contact Information

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### Sign-off

I have reviewed and approved our organization's Quality Improvement Plan



\_\_\_\_\_ John Krause, Board Chair



\_\_\_\_\_ Tim Siemens, Chief Executive Officer & Quality Council Chair



\_\_\_\_\_ Fola Akano, Senior Administrator Long-Term Care & Continuous Quality Improvement Committee Chair/Lead



\_\_\_\_\_ Erin Heynemans, Director of Care

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Radiant Care Tabor Manor 2024 - 2025 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 Centered	To foster a culture of resident centered care.	Percentage of residents responding positively (very satisfied and satisfied) to Question 6, 7 and 10 pertaining to personal care preferences and receiving care in a non-rushed manner.	<b>Question 6</b> 87% (48 of 55) positive responses	<b>Question 6</b> 92% positive responses	To match best performance in other categories on Resident Satisfaction Survey.	Staff will organize care that is shaped around the resident, know the resident as a whole person and use language that supports the principles of resident-centered care.	Staff PSWs in Day/Evening lines to promote mixing of skill sets, senior and junior staff on each unit.	Day/Evening PSW schedules maintained.	Ongoing.	
	To increase resident satisfaction related to: • Personal care including bathing, hygiene, safety and comfort,		<b>Question 7</b> 92% (49 of 53) positive responses	<b>Question 7</b> 93% positive responses			Hold in-services to train and encourage staff to use a resident-centered approach to care; review applicable policies.	In-services held.	Hold in-services by April 30th.	
			<b>Question 10</b> 78% (42 of 54) positive responses	<b>Question 10</b> 85% positive responses		Audits completed and changes made, if needed.	Audits completed.	June 3rd, 2024.		
					Education that requires staff sign-off and includes: • Personal care • Safe transfers • Respecting resident's preferences for care routines	Hold in-services, conduct lift training, fact sheets, and one-on-one demonstrations, Q&A.	In-services held.	June 3rd, 2024 and ongoing.		
						Complete fact sheet for all staff and add to communication binder.	Documents created.	June 3rd, 2024.		

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	lifting, transferring etc. <ul style="list-style-type: none"> <li>• Personal preference for care routines.</li> <li>• Staff to provide care in a non-rushed manner while considering the strengths, preference and needs of resident in order to allow them optimal independence at their own pace.</li> </ul>						Develop worksheets for daily care with specific resident focused tasks (visits, Montessori activities) for each PSW. Worksheets to be submitted at the end of each shift.  Check-ins with residents at Residents' Council meetings.  Audits: <ul style="list-style-type: none"> <li>• Resident rooms</li> <li>• Resident wheelchairs for cleanliness</li> <li>• audits using general observations of residents' appearance to ensure appropriate personal care is completed.</li> </ul>	Review submitted worksheets, audit for compliance.          Residents' Council minutes.       Audits completed.	May 17th, 2024 and ongoing.          June 28th, 2024 and ongoing.       June 28th, 2024 and ongoing.	

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						Include mentor staff member to: <ul style="list-style-type: none"> <li>Reinforce routines, reinforce non-rushed, resident centered approach.</li> <li>Support and train new hires.</li> <li>Advocate for resident care needs.</li> </ul>	<ul style="list-style-type: none"> <li>Additional orientation and training for new staff.</li> </ul> GPA, PREP-LTC Preceptor training and UFirst training for mentor staff.  Advocate for residents.	Review and update of orientation checklist.  Changes in routine documented in departmental meeting minutes.  Audits of resident care completed.  % of positive responses.	May 6th, 2024  May 17th, 2024  June 28th, 2024, and ongoing.  Ongoing.	