

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



Long-Term Care March 2025

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.

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### Overview of Our Organization's Quality Improvement Plan

#### Overview

The objective of our Quality Improvement Plan (QIP) targets three key areas: (1) enhancing satisfaction among residents and families or substitute decision-makers (SDMs) by providing clear contact information for inquiries related to long-term care (LTC) programs; (2) strengthening the role of family members as essential partners in care through improved communication between the home and residents' families; and (3) personalizing care to enhance resident experiences by considering individual communication styles and interests. This objective was selected based on feedback from LTC residents, highlighting lower satisfaction ratings in the 2024 Resident Satisfaction Surveys.

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

Over the past year, we have dedicated most of our staff's time and energy to ensuring the safety and support of our residents, staff, visitors, and family members. We will continue to prioritize quality improvement efforts aimed at enhancing resident satisfaction, particularly in strengthening communication between the home, residents, and their families.

#### **Resident Experience**

This year's Quality Improvement Plan (QIP) has been developed in consultation with our Resident Council to enhance resident satisfaction, specifically regarding communication between the home, residents, and their family members, based on the feedback received.

We are committed to collaborating with residents and gathering their feedback through regular Resident Council meetings and our annual Resident Satisfaction Surveys. After identifying areas for improvement, we held discussions with the Resident Council, which supported our focus on enhancing communication between the home, residents, and their family members in the coming year. Our staff will create an action plan and report back to both the Resident Council and Family Council to share our strategies for improving resident satisfaction.

#### 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

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

Bronwen Hadfield, Administrator Long-Term Care



## 2025 - 2026 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
Communication	To improve resident and family/SDM satisfaction re: knowing who to contact for LTC program-specific inquiries	Percentage of residents responding positively to the following questions: (1) Staff awareness of my personal preferences of routines for waking up in the morning, bedtime rituals and hygiene choices, and		93% positive responses	To match best performance in other categories on Resident Experience Survey	Review and update existing admission information packages	Review existing packages Coordinate with admission team to update admission packages	Information reviewed Updates made	April 1, 2025 April 30, 2025
	To promote the role of family members as key partners in the circle of care by improving communication	reflection of awareness in their daily care; (2) Staff care that considers my strengths, preferences and needs in a non-rushed manner allowing me the optimal independence at my own pace; (3) Physiotherapy services offered at Radiant Care Pleasant Manor; (4) I was involved in decisions about my care as much as I wanted to be				Create a pamphlet / document that outlines roles, responsibilities, and contact information for each department	Create document Provide education to admission team	Document created Education scheduled for staff and completed	June 1, 2025 Hold in-services by June 15, 2025
						Create a family / SDM newsletter based on their feedback, to include home-specific events, upcoming special events, department-specific	Create audit / questionnaire Complete audits with family / SDM for feedback	Audit / questionnaire created Audits conducted	April 1, 2025 April 30, 2025
	between the home and residents' family members					news and updates; email once monthly to family / SDM and post in resident rooms. (This is in addition to existing resident	Create family / SDM newsletter Implement audit / questionnaires to family / SDM for feedback on new process	Newsletter to be created Audits compiled and feedback implemented	May 31, 2025 July 15, 2025



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	To enhance resident experience by personalizing care, including communication styles and					Create cue cards to reflect preferences, interests and care- related routines to improve residents' sense of quality care and safety	Create cue cards In-services to educate team members of purpose	Cue cards created In-services scheduled	April 1, 2025 April 15, 2025
	interests					Information to be posted in resident rooms	Post information in resident rooms	Information posted	May 15, 2025
						Ask residents for feedback to determine effectiveness	Create audits / questionnaire for residents	Audits created and implemented	June 15, 2025