Let's Make Healthy Change Happen.



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

# Radiant Care Pleasant Manor

Supportive Housing 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 we focus on in our QIP is aimed at improving client experience, particularly related to participating in the development of the client care plan. We chose this objective to respond to feedback from supportive housing (SH) clients that identified it as an area of lower satisfaction on the 2024 Pleasant Manor Supportive Housing Client Satisfaction Survey.

Our QIP aligns with the quality objectives of our organization's strategic plan, and with our Multi-Sector Service Accountability Agreement (M-SAA). Further, our QIP aligns with provincial and regional strategies of client-centered care, as well as Seniors Strategy in the province. It is integrated with Health Quality Ontario's (HQO) and the Ontario Health at Home (OHaT) health services plan that focuses on client experience.

## Describe your Organization's Greatest Quality Improvement Achievement from the Past Year

We successfully implemented our QIP this past year, maintaining our goal of providing enhanced social care to identified tenants. In accordance with our three-year Strategic Plan of recovering, rebuilding, restoring, we offered a number of community events to our seniors throughout 2024. The multi-disciplinary team continues to meet regularly to discuss clients who are at risk of social isolation and provide supports to assist them.

#### Patient/Client/Resident Partnering & Relations

Upon receiving our Supportive Housing Client Satisfaction Survey results, staff identify an area for improvement and create an action plan. We then report back to the Tenant Council to let them know how we plan to improve in the identified area.

#### **Contact Information**

Tim Siemens, CEO, Radiant Care 1 Tabor Drive, St. Catharines, ON L2N 1V9 tims@radiantcare.net or 905-934-3414, ext. 1052

## 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

Megan Challice, Supportive Housing Manager

# 2025 - 2026 Quality Improvement Plan - Supportive Housing

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure/ Indicator	Current Performance	Target Performan ce	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
Client Centered	Increase client participation in plan of care by October 31, 2025	% of affirmative responses to the following question on the Supportive	90% (27 of 30) affirmative responses	96% (29 of 30) affirmative responses	performance in other categories on Supportive Housing Client	with new clients	with all new clients to discuss and create their plan of care	new clients	Meet with each new client upon admission, beginning immediately	
		Housing Client Satisfaction Survey: "Did you participate in your plan of care?"			Survey	Review/update plan of care with existing clients	Supportive Housing Manager or delegate will meet with each existing client to review and update their plan of care	existing clients	Meet with each existing client before October 31, 2025	
		Gaio .				Supportive Housing staff to continue completing semi-annual reassessments of care plan with client, ensuring participation of client	Supportive Housing Manager will provide a script and instruction to staff about reviewing the care plan together with the client	instruction	Script and instruction provided by May 15, 2025	