

Quality Improvement Plan (QIP)

**Narrative for Health Care Organizations in
Ontario**

2024/25



OVERVIEW

Mackenzie Health Long Term Care (Mackenzie Health-LTC) and UniversalCare Canada Inc. have partnered since Dec 1, 2010, to operate a 170-bed Long Term Care Home within Mackenzie Richmond Hill Hospital and are members of the Western York Region Ontario Health Team. UniversalCare/Mackenzie Health-LTC aligns with Accreditation Canada and operates following the Long-Term Care Home Service Accountability Agreement. UniversalCare/Mackenzie Health-LTC strategic goals are to provide exceptional care and services to its seniors by respecting residents' Bill of Rights and meeting all requirements stipulated in the Fixing Long-Term Care Homes Act 2021, and Ontario Regulation 246/22.

UniversalCare/Mackenzie Health-LTC Pillars of Success are:

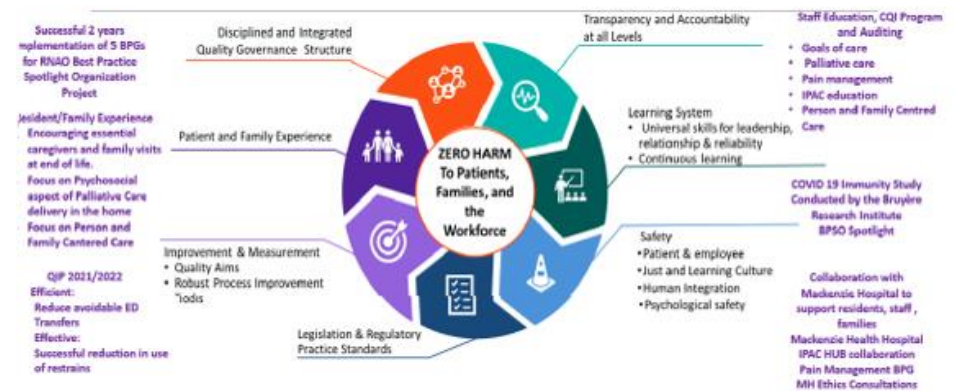
- Compassionately caring for our residents, families, and teams
- Uncompromising value to our Partners
- Leadership – We are stronger together; go beyond industry standards
- Trust – Always transparent honest and forthcoming
- Unwavering delivery of quality and safety
- Respect – Earn and demonstrate it everyday.
- Entrepreneurial Spirit – Empowering our People!

The various programs provided in the Long-Term Care Home ensure that the resident is in an exceptional environment for recreational activities and socialization. Through various programs & active participation, residents experience autonomy and satisfaction along with an increase in self-esteem and quality of life.

Quality improvement is emphasized at our Long-Term Care Home and is a part of our daily routine. Our goal is to enhance resident care and services by providing compassionate, holistic-centered care through innovation and excellence. Our inter-professional team demonstrate professionalism with a kind and friendly attitude

towards our residents and family members with the focus of obtaining resident satisfaction and advancing the quality of care. UniversalCare/Mackenzie Health-LTC is a place where we encourage collaborative practice and community partnership to achieve excellence in resident care. Our interprofessional team works continuously to maximize access to care and services by maintaining strong ties through collaboration with Mackenzie Health Hospital teams from Dialysis, Emergency, Complex Continuing Care, Infection Prevention & Control, and the Nurse Led Outreach Team.

Mackenzie Health – LTC Quality & Resident Safety Framework



ACCESS AND FLOW

In 2023, UniversalCare/Mackenzie Health-LTC made substantial strides in patient access and flow by implementing RNAO pathways for admissions, delirium, and palliative care. Building on this success, 2024 will see the addition of RNAO clinical pathways for falls, palliative approach to care, and end of life will be implemented. Notably, avoidable hospital transfers declined over the past year due to the successful aging in place initiative and the implementation of two Best Practice Guidelines (BPG's); palliative approach to care and end of life care.

Our clinical team continues to utilize electronic medical record (EMR) for timely follow up on history, treatment plans, and diagnostic reports. The use of EMR allows for timely intervention for residents, which helps to minimize transfer to the Emergency Department (ED).

In addition, our interprofessional team works closely with Behavior Supports Ontario to support our residents with responsive behaviors and prevention of ED transfers due to behaviour-related concerns. We have a Behavioural Support lead in the home 3 days per week. Our pharmacist consultant conducts medication review including consulting in medication appropriateness, minimizing the use of antipsychotics, effective pain management, and involvement in palliative care. The pharmacist consultant also plays an essential role in the prevention of fall incidents by providing health promotion regarding fall incidents and conducting reviews of high-fall risk medications. The pharmacist works closely with our team to enhance pain and symptom management and participates in quality improvement meetings such as in Pharmacy and Therapeutic, Nursing Practice, Professional and Advisory Committees.

EQUITY AND INDIGENOUS HEALTH

In Universal/Mackenzie Health-LTC residents are treated with utmost respect and receive excellent services. Residents receive culturally sensitive and diverse care from the staff. In our home we are sensitive to the Health Equity Impact Assessment for our Populations of residents, staff, families, and care givers. Using evidence, the interprofessional team identified which populations may experience significant unintended health impacts (positive or negative) because of the planned policy, program, or initiative.

We identified the following determinants and health inequities that must be considered alongside the populations we serve:

- Income and Social Status
- Social support networks
- Education and Literacy
- Physical Environment
- Social Environments
- Personal Health Practices and Coping Skills
- Health services
- Gender
- Culture
- Race

Furthermore, UniversalCare/Mackenzie Health LTC is committed to making the home accessible to individuals with disabilities. Our commitment extends to compassionate care for our residents, staff, volunteers, and visitors in meeting or exceeding the standards set out in the Accessibility for Ontarians with Disabilities Act, 2005. We integrate this commitment throughout our operations, fostering an environment where persons with disabilities will benefit from the same level of care and/or services available to those without disabilities. We promote accessibility through policies, practices, and procedures, reinforcing our overarching commitment to equity and inclusivity.

PATIENT/CLIENT/RESIDENT EXPERIENCE

At UniversalCare/Mackenzie Health-LTC, our interprofessional team is dedicated to delivering high-quality resident-centered care by actively incorporating patient and resident feedback. We conduct an annual Resident and Family Satisfaction Survey, sharing results with both Resident and Family Council. Resident and Family Satisfaction Survey focus is on resident centered care. The results of the survey are analyzed and lead to improvement initiatives by the home. Analysis of 2022 and 2023 Satisfaction Survey results include being satisfied and very satisfied with:

- Staff address me by my preferred name – 2023 response is 96.97% with an increase of 1.22% from 2022.
- Do you feel the staff are respectful – 2023 response is 87.88% with a favourable increase of 3.11% from 2022.
- Is Resident's cultural beliefs respected? – 2023 response is 96.88% with a favourable increase of 10.21% from 2022.

Residents and families participate in an annual care conference with the interdisciplinary team as well as special care conference during the year when there are changes in health status or any concerns with care.

PROVIDER EXPERIENCE

UniversalCare/Mackenzie Health-LTC, like many other health care organizations has faced staffing challenges in the last year. Our goal is to recruit and retain dedicated staff, ensuring continuity of care for our residents and their families. Throughout the year, we prioritized various staff appreciation events to acknowledge and celebrate the hard work and commitment of our team. At the heart of our efforts is the commitment of our interprofessional team at UniversalCare/Mackenzie Health-LTC, to provide high quality resident centered care. A significant achievement in 2023 was the designation of UniversalCare/Mackenzie Health-LTC as a Best Practice Spotlight Organization (BPSO) by the Registered Nurses Association of Ontario (RNAO). This was a 3-year long journey from 2020–2023 to achieve full designation. BPSO is a quality improvement project that uses Best Practice Guidelines (BPGs) to enhance programs and services in the home.

Journey to BPSO
Mackenzie Health Long Term Care
Richmond Hill, Ontario

Pain
Goals of pain management are focused on reducing the severity of pain and the effect of pain on the resident's functionality and quality of life.

How do we manage pain using BPSO guidelines?

BPSO: Assessment and Management of Pain
Pain brochure
Intentional Hourly Rounding Pilot Project

- Interprofessional study of pain assessment and management
- Intentional hourly rounding transferred to electronic chart
- Goal is to improve pain assessment and management
- Identification of designated Pain Quality Champions by providing full paid day for three registered staff on a monthly basis
- Audit resident charts for proper pain control
- Ongoing education for all staff
- Review of medication regimen for pain control
- Ongoing dissemination, evaluation and sustainability of pain management for residents, families and staff

Mackenzie Health LTC is a home with 170 beds which includes 34 interim beds and 20 dialysis beds.

RNAO Best Practice Spotlight Organization Project:
Best Practice Guidelines (BPG):

1. Assessment and Management of Pain
2. A Palliative Approach to Care in the Last 12 Months of Life
3. End of Life Care During the Last Days and Hours
4. Alternative Approaches to use the Use of Restraints
5. Person and Family Centered Care

The Palliative Approach

- A Palliative Approach to Care in the Last 12 months of Life
- End-of-life Care: During the Last Days and Hours

The purpose of the Palliative Care Program is to provide a holistic assessment of a resident's functional abilities and assist the resident and family to make choices regarding goals of care and end of life care decisions. The program is based on the LTCHA 2007, O. Reg. 79/10 and Health Quality Ontario Quality Standards for Palliative Care.

- Identification and Assessment of Needs
- Access to Palliative Care
- Discussions and Goals of Care
- Individualized, Person-Centered Care Plan
- Management of Pain and Symptoms
- Psychological Aspects of Care
- Caregiver Support
- Education for Patients, Substitute Decision-Makers, Families, and Caregivers

Alternative Approaches to the Use of Restraints

Restraints are physical, chemical or environmental measures used to control the physical or behavioural activity of a person or a portion of his/her body.

Physical restraints limit a resident's movement such as:

- A table fixed to a wheelchair
- A bed rail that cannot be opened by the Resident
- A fastened seat belt on the wheelchair

Person and Family-Centered Care

Person centered care is an approach to care that considers the whole person, their history and their goals for their care.

- Goals of care discussions by interprofessional team.
- Build empowering relationships.
- Create space for residents and their families to talk about their personhood and their values.

UniversalCare/Mackenzie Health-LTC offers a unique opportunity to staff in our home to collaborate closely with staff at Mackenzie Richmond Hill Hospital for access to services provided by the Ethicist, Geriatricians, Nephrologists, GI, and wound care specialists to support our residents and team. This supportive network ensures staff at our home have timely access to experts in various specialties that are critical to the population we serve.

SAFETY

Infection Prevention and Control

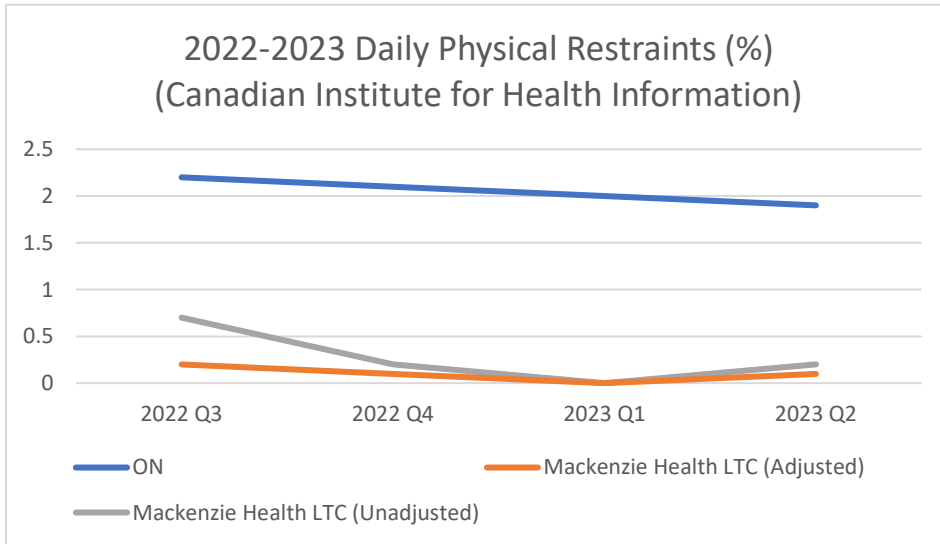
Continuous IPAC education and auditing of all staff and essential caregivers was conducted by both in-house IPAC Manager and leadership team as well as the Mackenzie Health IPAC team. UniversalCare/Mackenzie Health LTC Home IPAC Lead completed the IPAC Canada Essentials of Infection Prevention and Control training.

The home ensures that adequate supply of PPE is maintained by continuous monitoring of inventory and is readily accessible to front line staff. Our team collaborated with York Region Public Health to

conduct several in house vaccine clinics for residents, and staff. 2023/2024 preparation for vaccination started in October 2023 and continue based on updated communication from Public Health. Vaccination clinics were held for COVID-19 and Influenza vaccines. Our home achieved influenza vaccinations rates of 70% for residents and 50% for staff, whereas we achieved 2-dose Covid-19 vaccination rates of 98% each for residents and staff.

Percentage of Residents in Daily Physical Restraints

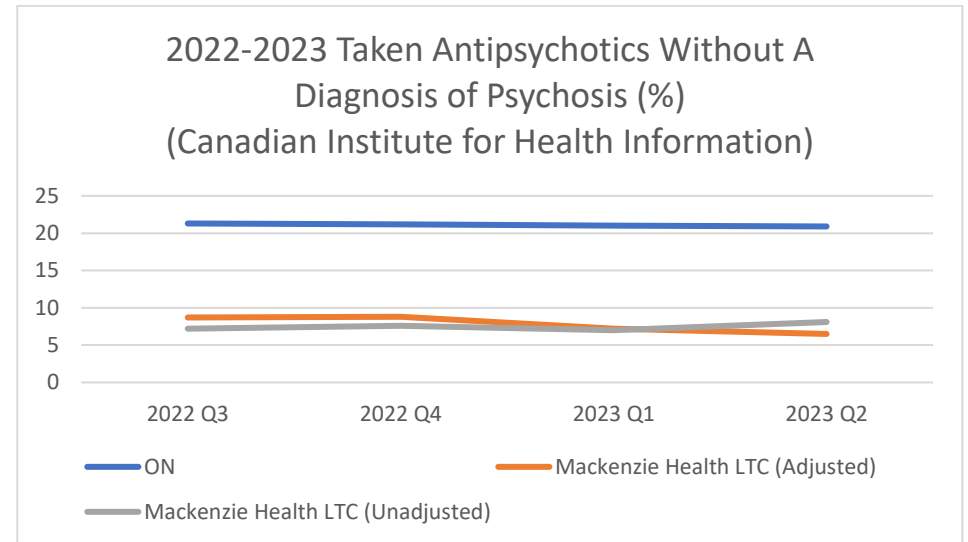
UniversalCare/Mackenzie Health-LTC continues to prioritize reducing the use of physical restraints on residents within our home to 1%. We achieved a 0% rate in the first quarter of 2023, with only a slight increase to 0.1% (adjusted) and 0.2% (unadjusted) in the second quarter. By comparison, the provincial average for use of physical restraints on residents in a LTC setting is 1.8%.



Medication Management for LTC residents without psychosis

Reducing the use of antipsychotic medications for patients not diagnosed with psychosis takes a considerable amount of time due

to the complex nature of our residents, given their responsive behaviours present with different types of dementia. This requires a joint team effort by residents, family members and our interprofessional team members. Mackenzie Health LTC successfully targeted a reduction in the use of antipsychotic medication without a diagnosis, aiming for a decrease from 9.2% in Q1 2022/23 to 9.0% in Q2 2023/24. By Q2 2023, the provincial average for this indicator was 20.9%, making the homes' achievement exceptional at 6.5% - a notable success in surpassing both our initial goal and the provincial benchmark, emphasizing our commitment to responsible and personalized resident care.



POPULATION HEALTH APPROACH

UniversalCare/Mackenzie Health-LTC places a strong emphasis on initiatives aligned with population health, fostering collaboration with diverse partners and stakeholders to enhance integration and continuity of resident care. Our clinical teams collaborate to assist residents in their continuum of care with support from dialysis,

psychogeriatric, urology, dermatology, endocrinology, and infection prevention & control specialists, the chaplain, and social worker.

In partnership with the Ontario Shores Psychogeriatric Outreach Team, we extend our specialized geriatric programs to address psychiatric conditions and challenging behaviours among our elderly residents. This program includes psychogeriatric assessment, diagnosis, treatment, and rehabilitation services, contributing to overall well-being of our population.

As an RNAO BPSO Direct organization, our interprofessional team benefits from the guidance of a dedicated coach in completing gap analysis, organizing education for staff related to Best Practice Guidelines, and to provide ongoing guidance throughout the duration of the BPSO project. This collaboration has led to the successful implementation of two Best Practice Guideline related to Palliative care, resulting in a significant decrease of avoidable ED transfers while also leading to a high level of satisfaction of the residents and their families as part of Person and Family centered care. The achievements have been highlighted through presentations at RNAO knowledge exchange forums in March 2023, the International RNAO symposium in June 2023, and at the UniversalCare Symposium in October 2023.

CONTACT INFORMATION

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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 March 23, 2024.



Fay Lim-Lambie, Board Chair or delegate (Mackenzie Health)



Azi Bolorchi, Quality Committee Chair or Delegate (Mackenzie Health)



Mary-Agnes Wilson, Executive Vice President, COO & CNE (Mackenzie Health)



Altaf Stationwala (Mar 14, 2024 10:02 EDT)

Altaf Stationwala, President & Chief Executive Officer (Mackenzie Health)



Joseph Gulizia (Mar 14, 2024 09:59 EDT)

Joseph Gulizia, President & Chief Executive Officer (UniversalCare Inc.)