

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 4, 2020



UNIVERSALcare

OVERVIEW

Mackenzie Health Long Term Care (Mackenzie Health-LTC) has been part of Universal Care Corporation(UniversalCare) since December 1, 2010. UniversalCare/Mackenzie Health-LTC is a 170 bed facility within Mackenzie Health Richmond Hill hospital and is a member 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 Long-Term Care Homes Act, 2007 and Ontario Regulation 79/10;

UniversalCare/Mackenzie Health-LTC Pillars of success are:

Compassionately caring for our residents and team

Uncompromising value to our Partners

Leadership – Stronger together; go beyond industry standard

Trust – Always transparent honest and forthcoming

Unwavering delivery of quality and safety

Entrepreneurial Spirit – Invigorate it!

In UniversalCare/Mackenzie Health-LTC residents are treated with upmost respect and receive excellent services. Residents receive culturally sensitive and diverse care from the staff. The various programs provided in the facility ensures that the resident is in an excellent environment for recreational activities and socialization. Through various programs & active participation, residents are experiencing autonomy and satisfaction along with an increase of self-esteem and quality of life.

Quality improvement is greatly emphasized at this facility as it is a part of our daily routine. Our goal is to enhance our resident care and services by providing compassionate, holistic centered care through innovation and excellence. Our inter-professional team in this facility demonstrates friendly and kind attitudes to the residents and their family members with the focus of obtaining resident satisfaction and advancing the quality of care.

UniversalCare/Mackenzie Health-LTC is a place where we encouraged a collaborative practice and community partnership to achieve excellence in resident care.

Our interdisciplinary team worked continuously to maximize access to care by continuing strong collaboration with Mackenzie Health hospital teams from Dialysis, Emergency, Complex Continue Care, Infection Prevention & Control, the Nurse Led Outreach, etc.

In 2019, UniversalCare/Mackenzie Health-LTC continued to maintain several quality indicators below the Ontario average such as: the number of resident falls, the administration of Antipsychotic medication without an appropriate diagnosis, the percentage of residents who had newly occurring stage 2 to 4 skin injuries, the total number of infections and so on. UniversalCare/Mackenzie Health-LTC continues sustaining the diverse high standard programs, an example being the OLTCA Diabetes Protocol. This program helps promote individualized glycemic goals in residents with Diabetes while preserving their quality of life.

Due to the high acuity and rapid turn over of the residents in our home, we have chosen to continue to focus on the following priority indicators for 2020-2021:

1.The proportion of residents with a progressive, life-limiting illness,

that are identified to benefit from palliative care, who subsequently have their palliative care needs assessed using a comprehensive and holistic assessment.

2. Number of ED visits for modified list of ambulatory care-sensitive conditions per 100 long-term care residents.

UniversalCare/Mackenzie Health-LTC proposal was appraised by a team of reviewers comprised of representatives from Registered Nurses' Association of Ontario's (RNAO) -Request for Proposals (RFP) in relation to the Long-Term Care Best Practice Spotlight Organization RNAO's LTC Best Practices Program, BPSO Coaches and members of the research and evaluation team. RNAO received a tremendous response to this RFP from across the province. UniversalCare/Mackenzie Health-LTC has been selected as a LTC-BPSO pre-designate!

The following best practice guidelines will be implemented during designated period (2020-2022)

1. Assessment and Management of Pressure Injuries for the Inter-professional Team.
2. Assessment and Management of Pain;
3. A Palliative Approach to Care in the last 12 Months of Life.

The LTC-BPSO Terms and Conditions Agreement was signed by President and the CEO of the company.

UniversalCare/Mackenzie Health-LTC team utilizes evidence-based practice and commitment to research and innovation to promote high-quality continuum of care services. The following are the 2019 greatest QI achievements:

Successful approval of RNAO- Best Practice Spot Organization Designated Home for 2020-2022.

UniversalCare/Mackenzie Health-LTC staff, residents, families, and management are all very excited to embark on this journey of a BPSO designated home, and to embrace partnership with RNAO that will enhance services to our residents, families and community partners. UniversalCare/Mackenzie Health-LTC, leadership, residents and families have already supported the implementation of many best practice guidelines, and are very pleased with the successes, our home has demonstrated good results and is looking forward to extending skills and knowledge through implementation process with the assistance of RNAO. UniversalCare/Mackenzie Health-LTC has published articles for the RNAO LTC-BPG newsletter in conjunction with RNAO LTC-Coordinator: RNAO Best Practice: Evidence Booster: Professional Education: An Intervention Strategy for improvement Outcomes-2018; Our Holistic Approach to Palliation in Long Term Care-2018; Best Practices in Long-Term Care: Working together towards excellence in resident care-2018; Providing the Right Care at the Right time by the Right Provider-Nurse Practitioners in LTC-2018; Improving Quality of Life using Prescribed Cannabis in Long Term setting-2018; Publication of the article in Registered Nurse Journal: A celebration of success in LTC-2019.

UniversalCare/Mackenzie Health-LTC has also presented Best

DESCRIBE YOUR ORGANIZATION'S GREATEST QI ACHIEVEMENT FROM THE PAST YEAR

Practices supported by RNAO for OLTC (2 Posters Presentations). In 2019, NP/ Director of Care, Clinical Services was nominated for the OLTC Leadership Excellence Award, these prestigious acts of recognition have captured the growing support of our organization's stakeholders. Without a doubt all levels of UniversalCare/Mackenzie Health-LTC organization are committed to the RNAO Best Practice guidelines implementation.

UniversalCare/Mackenzie Health-LTC facility led by Director of Care clinical Services/Nurse Practitioner and Social Worker in collaboration with the Central Local Health Integration Network (LHIN)

developed and implemented a comprehensive and formalised Palliative Care program- "Aging in Place". Resource Package as well as Policy was developed and implemented.

This approach is helping UniversalCare/Mackenzie Health-LTC facility to reduce unnecessary and avoidable Emergency Department visits.

The development of this program also involved key stakeholders such as residents, families and inter-professional team to ensure the best quality of care possible for our residents and their families.

Continues utilization of Medical Cannabis in LTC for improving chronic, neuropathic pain control, dramatic decrease of antipsychotic use, decrease symptoms of responsive behaviour, improve appetite and use for palliative care residents.

UniversalCare/Mackenzie Health-LTC collaborates with vary partners and stakeholders to improve integration and continuity of resident care.

UniversalCare/Mackenzie Health-LTC clinical teams' members and specialists assist residents in their continuum of care such as in dialysis, psychogeriatric, urologist, dermatologist, endocrinologist, dermatologist, infection prevention & control physician, chaplain, social worker, etc.

Ontario Shores Psychogeriatric Outreach Team provides various specialized Geriatrics programs for our elderly with serious mental illness and present with challenging behaviors. This program includes psychogeriatric assessment, diagnosis, treatment and rehabilitation services.

The 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 is also essential in the prevention of fall incidents by providing health promotion regarding fall incidents and conducting reviews of high-fall risk medications. Our pharmacy reps participate in quality improvement meetings such as in Pharmacy and Therapeutic, Nursing Practice, Professional and Advisory Committees.

RNAO Best Practice Coordinator supports our clinical team to complete gap analysis and provide staff education. Feedback regarding how to access the best evidence-based resources and tools are provided for quality improvement programs such as skin injuries, falls, continence care, and pain.

Continue collaboration with approved suppliers in the utilization and distribution of Medical Cannabis for our residents.

Effective communication between the hospital and the Long-term

COLLABORATION AND INTEGRATION

Care's Infection prevention & control (IPAC) team for cases where residents are transferred to the hospital and diagnosed with healthcare-associated infections.

Public Health Inspectors were greatly involved with the LTC during outbreaks with their participation in outbreak and IPAC committee meetings. They also complete inspections in the LTC for food safety, environment cleaning, cold chain and ultimately provide feedback to IPAC team.

Mackenzie Health - Volunteer Services who provide us with volunteers and co-op students, and community churches to provide multi-faith services. Spiritual Department, Chaplin to provide communion, church services, and assist in planning other cultural events.

Other Collaborations:

- Town of Richmond Hill helped initiate or Cyber Savvy Seniors computer program (funding received through New Horizons for Seniors)
- Toronto Storytelling helping to initiate We Are Our Stories program (funding to be received through New Horizons for Seniors)
- St. John's Ambulance for Pet Therapy
- Tina Talent Agency for music entertainment
- Afya Hort Therapy for horticultural therapy services
- March of Dimes for transportation services for resident outings
- Independent entertainers

PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS

Approximately 3 years ago, our home implemented a formalized pre-admission process as a quality improvement measure to enhance the care provided to our residents and families from the very beginning. Once a resident and/or family has accepted a bed offer, our Admissions Coordinator works in collaboration with the Placement Coordinator from the CLHIN to arrange a pre-admission meeting with the new resident/family. This inter-professional meeting includes our Nurse Practitioner, Nurse Manager, Food Services Manager, Programs Manager, Social Worker and Admissions Coordinator. The Administrator and other managers also have the opportunity to introduce themselves and offer support to the resident/family. The purpose of this meeting is to corroborate medical and social histories between the admission application and the family/resident, to explain the high-quality care that is provided by our inter-professional team, and to review advanced care directives. Our goal overall is to discuss expectations of the resident and family and to ensure our team has the most accurate information about the resident in order to provide the right care by the right provider in the manner in which the resident prefers.

Family and resident councils are also held monthly in which members have the opportunity to provide positive constructive feedback and suggestions for improvement regarding our services and ultimately improve the quality of resident care and create a safe environment for them. At these meetings, the interdisciplinary team delivered comprehensive presentations which aligns with our QIP and CQI programs.

Annual resident and family survey results are shared and feedback is encouraged to identify areas of improvement.

WORKPLACE VIOLENCE PREVENTION

Mackenzie Health Long Term Care is committed to treat all employees with respect and fairness. All workers have the right to be free from all workplace harassment, including, but not limited to, sexual and psychological.

Our Home has a "Workplace Violence and Harassment Prevention" policy that outlines supporting procedures to address all workplace violence and harassment incidents, including preventing, recognizing and reporting incidents in a timely manner. The policy is provided to new employees during orientation, and reviewed annually by all staff, or at anytime an incident of violence or harassment occurs. It is made accessible to all employees on our company's mandatory training website online, and posted on our health & safety board. The home's Joint Health & Safety Committee also reviews this policy, in which the policy is then acknowledged and signed by senior management, and the Joint Health & Safety Committee management co-chair and worker co-chair.

In addition, workplace violence incidents are discussed at our monthly leadership meetings, at our monthly corporate meetings, and at the hospital liaison meetings. Controlling the risks and post hazard assessment are important and communicated regularly, ensuring our employees are safe and protected.

We are continuously ensuring that training is kept up-to-date, that our certified health & safety members attend refresher courses as

needed, and encouraging staff to attend monthly health & safety committee meetings. Our management team completes the Supervisor Health and Safety 5 Steps Awareness certification annually, and over the past year, we have increased our Joint Health & Safety Committee membership, and have included a minimum of one worker representation from each department, to ensure a wide perspective for the safety of our employees.

ALTERNATE LEVEL OF CARE

Our home works closely with the Local Health and Integration Network (LHIN) to address ALC challenges within hospitals (not just Mackenzie Health, but all hospitals). Placement into our home is determined by the LHIN. The LHIN works in close collaboration with the hospitals to determine whether priority access to beds is given to applicants in hospitals or in the community. Our Long Term Care program (136 beds) regularly admits applicants from all settings, including the acute hospitals as well as the hospital Reactivation Centres that were created specifically to help alleviate ALC capacity issues. Our Interim Long Term Care program (34 beds) was designed specifically for applicants who are ALC in hospital or in the Reactivation Centres.

An example of how our home helps to address ALC issues is shown as follows: in the month of January 2020, we admitted 12 new residents (7 in the Interim Unit, 5 in the LTC). 8 of the 12 admissions came from either the hospital or the Reactivation Centres.

VIRTUAL CARE

Ontario Telemedicine Network (OTN) is utilized in the Mackenzie Health LTC in cases where complex care and specialists are required. The use of OTN eliminates the negative impact of physically transferring residents such as unnecessary hospitalizations and costs. The OTN benefits the quality of care by improving timely access to convenient and quality care, accessibility to care and outcomes, and enables collaboration between healthcare providers.

The Electronic Health Records (EHR) facilitates interprofessional communication and collaboration through the electronic sharing of resident health information across different healthcare settings and its ease of access.

Virtual Care is convenient and easy to use in Mackenzie Health LTC. It only requires a laptop with camera in order to connect with healthcare providers for educational sessions, conferences, meetings, resident appointments, etc.

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 30, 2020



Board Chair / Licensee or delegate



Administrator /Executive Director



Quality Committee Chair or delegate

Other leadership as appropriate