

CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2021

Allendale Long-Term Care Home



OVERVIEW

Located in Milton, Allendale is a 200 bed Long-term care home owned and operated by Halton Region. Our mission is to provide person-centered care that respects and supports people to live their lives their way. This mission drives our commitment to provide individualized care to residents with the primary goal to provide quality care that is safe. To ensure continued organizational success, the home continuously engages in quality improvement initiatives.

IDENTIFYING AREAS OF PRIORITY

Allendale participates in integrated planning with other Halton Region Long-term care homes in order to take into account organizational priorities and strategic and operational plans. This alignment allows the home to effectively clarify priorities, direct resources, monitor progress and act on results.

Within Allendale there is the ongoing monitoring, analyzing, and evaluating the quality of care and service using key quality indicators, internal audits, program evaluations, resident and family satisfaction & experience surveys and ongoing feedback. These mechanisms are used to identify and determine areas of priority.

Annually Allendale develops Quality Improvement Plans (QIP's) that include key areas of focus aligned to Provincial system priorities. The overall objective of the homes QIP has remained consistent from year to year with some refinements to change ideas/tactics and targets for improvement. Maintaining focus on core indicators such as resident experience and reducing antipsychotic use and avoidable ED visits, allows us to build on change ideas/tactics as well as sustain and spread improvements. These plans are integrated into the home's operational and strategic planning process. Due to the homes focus on pandemic response, the annual Quality Improvement Plan was paused during 2020 and 2021.

CONTINUOUS QUALITY IMPROVEMENT

Continuous Quality Improvement (CQI) is an essential component of the care and service delivery model. Halton Region's long-term care homes are committed to using evidence-based resources to support and sustain best practices that ensure the best possible resident care. Quality improvement processes are guided by the model of improvement and include use methodologies such as; PSDA, Lean, and Kaizen as well as implementation of evidence based best practices.

Allendale is recognized as Long-term Care Best Practice Spotlight Organization® (LTC-BPSO®) through the Registered Nurses Association Ontario (RNAO). The home has implemented and continues to sustain the following best practice guidelines (BPG's);

- Person- and Family-Centred Care,
- Preventing and Addressing Abuse and Neglect of Older Adults, and
- Preventing Falls and Reducing Injury from Falls, 4th Edition.
- Developing and Sustaining Nursing Leadership

As an ongoing practice, Allendale works with the RNAO LTC Best Practice Coordinator to implement new BPGs as appropriate based on ongoing organizational needs assessment.

PERFORMANCE MONITORING & MEASUREMENT

Allendale’s quality initiatives are supported by the homes measurement and accountability systems. Front line staff, managers and leadership staff rely on access to real time data integrate into the regular quality and risk management review processes. Review processes include;

- Performance indicators tracked at the home and program level
- Priority indicators outlined in the Annual Quality Improvement Plans
- Professional Advisory Clinical Indicator Reporting
- Quality and Safety Advisory Incident Reporting
- Municipal Benchmarking Indicators
- Satisfaction & Experience Survey & Other Survey Results

In 2021, Allendale performed above the provincial average on all six key quality indicators.

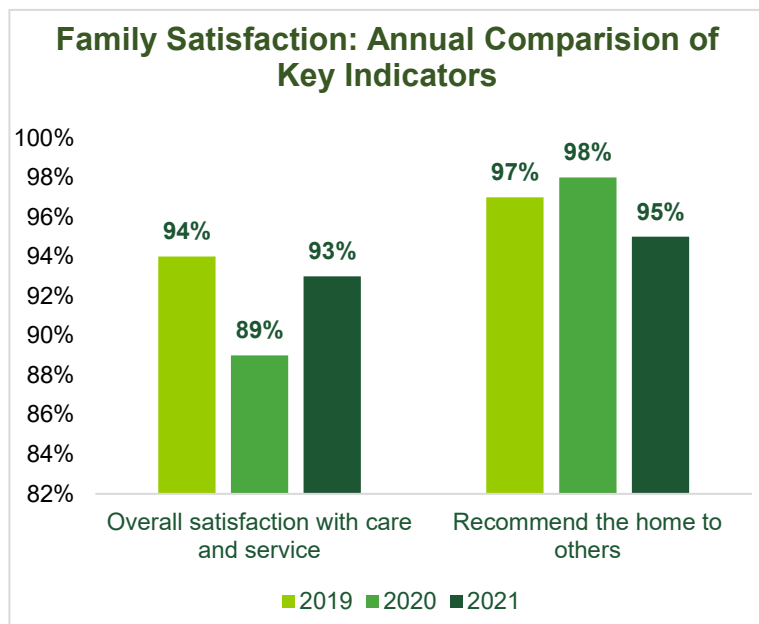
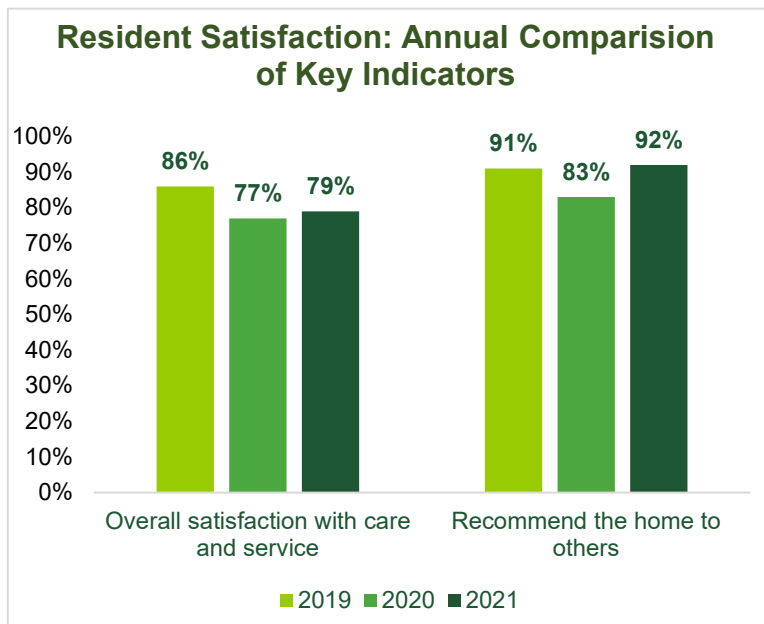
Quality Indicators	Ontario	Allendale
Daily physical restraints	2.8%	1.4%
Has a stage 2 to 4 pressure ulcer	2.5%	1%
Has fallen	16.7%	16.6%
Has pain	5.0%	1.4%
Worsened pain	9.4%	3.4%
Taken antipsychotics without a diagnosis of psychosis	19.3%	15.9%
Worsened mood from symptoms of depression	22.0%	9.7%
Rate of Avoidable ED Visits	15.3%	21.6%

Data Source: CIHI Public Reporting Site, Your Health System

At Allendale, resident and family satisfaction surveys are completed annually. Achieving a high level of satisfaction among residents, clients and family caregivers is a priority and staff use this feedback to support areas of improvement at the home. In 2021, the Annual Resident and Family Satisfaction survey was rolled out in October 2021.

- 92% of residents and 95% of families would recommend the Allendale to others

- 79% of residents and 93% of families are satisfied with the overall quality of care & services



Information and results of surveys and the homes other priority areas and initiatives are communicated to Resident and Family Council's, and provided at Town hall's, in newsletters and posted on the Quality Circle Bulletin Boards located in the home.

DESCRIPTION OF PRIORITY AREAS FOR QUALITY IMPROVEMENT

Based on feedback, assessment and identification of areas for continuous quality improvement, Allendale implemented the following quality improvements in 2021:

- Updated Volunteer orientation manual to include COVID-19 protocols and other essential onboarding information in one manual, waiting on final approval to send out to volunteers,
- Worked with continence committee and review residents to identify abilities and needs. Site visits were completed by continence representatives and Resident Coordinators to provide refresher education to staff and review product list used by residents.
- Participate in annual reviews of programs including falls, pain management, pressure injuries etc., to ensure goals of program are met.
- Ongoing review of CIHI's key quality indicators to ensure home is in alignment with provincial expectations.
- Implementation of weekly rounds rotating through RHAs

- Conduct audits and liaise with pharmacy to identify residents on antipsychotics and ensure diagnosis in place and appropriate medications are provided to the residents.
- Coordinate with BPSO site lead to implement falls Best Practice Guidelines (BPG's) based on gap analysis.
- Ensuring regular education /training on falls management is provided to direct care staff.
- Provide ongoing education to staff specific to Infection Prevention and Control (IPAC) requirements, management of acute infections, documentation etc.
- Ensuring regular education on pain management and complex wound care is offered for direct care staff.
- Liaise with pain/palliation consult as additional resource for staff to address resident's pain.
- Christmas High Tea in each Resident Home Area (RHA) dining room was held on December 16, 2021 adhering to the COVID-19 gathering restrictions as per public health directions. Holiday specials took place including Allendale made fresh Christmas treats, Christmas Day specials and New Year's Day meal specials.
- Measures taken by Life Enrichment (LE) team ensure they are promoting the LE programs/special events so residents and families are aware. Posters were put up on each RHA activity board and Volunteers and family members were encouraged to bring residents to programs.
- Review of LE programs/events to highlight various diverse groups/cultures throughout the year.
- Creation of Diversity Allendale Taskforce which includes staff, residents, volunteers, and care partners. The taskforce meets Monthly and guest speakers are invited. Some of the topics covered by guest speakers include being a Muslim in Canada; 2SLGBTQ+ issues in LTC.

Improvements planned for 2022:

- Emphasis on reducing avoidable ED visits through education to residents and families about the benefits of and approaches to preventing emergency department visits and maximizing use of Nurse Practitioner Support Teams Averting Transfers (NP-STAT) for support and clinical guidance.
- Living the Dementia Journey education for all staff.
- Building and environmental enhancements including; redecorating living rooms spaces to create warm and inviting spaces for residents and families as part of the homes Dementia Strategy.

- Based on resident feedback from Food Committee, Allendale's dietary department has implemented; delivery pizza, grilled cheese stations, and BBQ hamburgers which are served to residents as options on the 3- week menu cycle.

HOME QUALITY LEAD CONTACT INFORMATION

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