

2020/21 Quality Improvement Plan for Ontario Long Term Care Homes "Improvement Targets and Initiatives"

West Park LTC Centre 82 BUTTONWOOD AVENUE, Toronto , ON, M6M2J5

AIM		Measure									Change				
Issue	Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	External Collaborators	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) C = custom (add any other indicators you are working on)															
Theme I: Timely and Efficient Transitions	Efficient	Number of ED visits for modified list of ambulatory care-sensitive conditions* per 100 long-term care residents.	P	Rate per 100 residents / LTC home residents	CIHI CCRS, CIHI NACRS / October 2018 - September 2019	54337*	26.72	25.80	Alignment to the Toronto Central LHIN average		1)Continue utilization of the NLOT (Nurse Led Outreach Team)	NLOT nurse to assess the resident and collaborate with physician and resident stakeholders to utilize the treatment methods in the home as opposed to an avoidable transfer to the ED.	The number of times NLOT sees residents prior to subsequent transfer to ED visits	NLOT will assess residents and implement treatment plans in the home that then does not result in a transfer to ED.	
											2)The home will continue the utilization of the My Wishes program	Education to all front line staff, in class training sessions with a multidisciplinary approach	Percentage of full-time and part-time staff educated	All full-time and part-time frontline staff educated	
											3)Provide education to nurses on implementation of the SBAR tool	In-service education on documentation and utilization of the SBAR tool in order to identify early indications of possible avoidable ED transfers and how to avoid them	Percentage of frontline full-time and part-time staff educated on SBAR tool.	All frontline full-time and part-time staff educated on SBAR tool and SBAR tool will be implemented by May 2020.	
											4)To discuss resident's who have had an ED visit at our Resident Safety Committee	Multidisciplinary team to discuss purpose of the hospital transfer to establish if visit was avoidable and to mitigate further transfers, if appropriate.	Resident's who have been transferred to ED to be discussed at Resident Safety Committee.	All resident's who have been transferred to ED will be reviewed and discussed at Resident Safety Committee	
Theme II: Service Excellence	Patient-centred	Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences".	P	% / LTC home residents	In house data, InterRAI survey / April 2019 - March 2020	54337*	62.35	70.00	Approximately 12% improvement		1)Education to frontline staff directed at effective and therapeutic communication with the resident	To utilize online and classroom training to help support and educate the staff on effective communication and approach techniques.	Percentage of full-time and part-time staff educated	All full-time and part-time staff educated	
											2)"Tea Time with Managers"	Organized tea times with a group of managers with residents to encourage open dialogue to express concerns and opinions.	Number of residents attending the tea sessions	Resident's with a CPS score of 3 or less to have the opportunity to attend a minimum of one session per year	This will help to develop relationships between the managers and residents, helping residents to feel more comfortable in expressing their opinions.
											3)Mandatory education to frontline staff directed at Resident Rights	To utilize online and classroom training to educate all front line staff about the 27 resident rights and test staff on knowledge retention from the sessions.	Percentage of staff educated	Number of staff who receive 100% on knowledge retention test	
											4) Informing the residents about Resident's Rights.	Joint interactive discussions at Resident's Council and through Home Area Gatherings reviewing all 27 resident's rights to help alleviate the resident's fear of expressing their opinion.	Percentage of residents that attend the information sessions on Resident Rights and that participate in the Home Area Gatherings.	Resident's with a CPS score of 3 or less to have the opportunity to attend a minimum of one session per year	This will help to develop relationships between the managers and residents, helping residents to feel more comfortable in expressing their opinions.
Theme III: Safe and Effective Care	Effective	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	P	Proportion / LTC home residents	Local data collection / Most recent 6 month period	54337*	CB	CB	Identify and implement a tool to collect baseline data		1)Increase assessment skills of nursing staff around early identification of the need for a palliative approach to care	Continue to provide education for nurses regarding early identification of the need for a palliative approach to care	Percentage of nurses who attend training regarding early identification of the need for a palliative approach to care	All full-time and part-time nursing staff	
											2)Talk with residents about their illnesses, prognosis, goals of care and treatment options on admission, annually, and as needed. Engage physicians early	Train staff in facilitating conversations around illnesses, prognosis, goals of care and treatment options. Collaborating with NLOT and physicians in implementing best practice guidelines.	Percentage of staff trained in facilitating conversations around illness, prognosis, goals of care, and treatment options.	Full-time and part-time staff educated	