



# FAIRVIEW LODGE

## Continuous Quality Improvement Report Interim Report

### **Designated Leads**

Jessica Laurie, Assistant Administrator and Laura Morrison, Food Services Supervisor

### **Quality Improvement Priorities for 2022**

Fairview Lodge, an accredited 198 bed facility is one of four Long-Term Care homes operated by the Region Municipality of Durham, Long-Term Care and Services for Seniors. Fairview Lodge is committed to the divisional vision "To provide a community that embraces excellence in person-centered care" and strive to continuously improve the delivery of care and services and manage risk.

The Region of Durham, specifically the Long-Term Care division, has shared a Divisional 4-year Strategic Plan, with a yearly business plan each year. The overall strategy and initiatives are developed at this level. This plan is developed in collaboration with Hillsdale Terraces, Hillsdale Estates and Lakeview Manor. The home then takes the Divisional Business Plan to the individual home level and creates a Home Specific Business plan. The home continues to refine the required programs, implementation, and evaluation of new processes to provide high quality care and services. The home continues to promote choice, dignity, and respect to the residents.

Fairview Lodge is dedicated to continuous improvement projects and this year the home is focusing on two specific areas: Resident and Family Satisfaction Survey Results and Strengthening Medication Safety in Long-Term Care.

Our first area of focus is Resident and Family satisfaction. It continues to be a driving force for change and initiatives at Fairview Lodge. The home's goal is to improve areas that received a lower score on the 2021 survey. Being in a COVID-19 pandemic has been challenging for some departments who received lower than usual scores. The home will be focusing on Food services, Recreation and Environmental services.

The second area of focus is Strengthening Medication Safety Long-Term Care. The home was funded by the Ontario Ministry of Long-Term Care to be one of ten champion homes in the province. Fairview is working on evidence-based strategies for improving the medication management system of the home and to reduce harm associated with medication management errors. It's an opportunity to build quality improvement capacity and strengthen resident safety in the home. Based on the identified indicators, two priority medication safety project plans have been developed. The home's first priority of the project is the implementation of the Automated Dispensing Cabinet to be used for

emergency and starter medications. The second priority is a focus on reducing the time it takes for the morning medication pass process.

Our home's priorities have been identified in our 2023/24 QIP and Business Plan. Our QIP has 3 areas of focus:

**1) Increase in residents' rating of overall quality of care and services at Fairview Lodge.**

Action Items:

- Rekindling and reconnecting with residents and families by reviewing the admission process to ensure that the resident and families have a positive experience.
- Reconnecting with residents and families during the admission 6-week care conference by having each new admission will have a 6-week care conference where all applicable departmental managers/ designates attend to improve communication.

**2) Decrease the number of residents prescribed an antipsychotic medication without diagnosis of psychosis**

Action Items:

- Review of residents on antipsychotic using the Antipsychotic Medication Review in PCC. This is done by the Nurse Practitioner and Medication Management Clinical Lead in collaboration with the physicians.
- Capturing active hallucination/delusion during observation period.

**3) Decrease the percentage of residents who have worsening pain.**

Action Items:

- Initiating monthly audits of PRN pain medication received by each resident. Resulting in:
- Any resident more than 10 PRN pain medications will receive a Comprehensive Pain Assessment, and an assessment of their medications by RNEC or Physician and have their current Pain Management interventions reviewed by the interdisciplinary team

Fairview Lodge also created goals in our annual Business Plan for 2022/23 to enhance supports and services to the resident and families. The home has identified various projects including Palliation, laundry service audits, rekindling relationships with residents and families, admission transitional support and increase in technological supports. We will ensure that there is support with through educational and interdisciplinary team building exercises.

Fairview Lodge continues to thrive on providing support to the residents, families and staff to ensure quality of care for each resident.

## **Determination of Priorities**

Determining the homes priorities each year is an interprofessional process that involves many stakeholders. The first step is to identify potential gaps and opportunities for improvement.

The most important stakeholder is the resident. Every year the home conducts a resident satisfaction survey. This survey identifies areas of great satisfaction and any area they would like to see improved. This resident voice is identified as the most important feedback that the home can obtain. This combined with Residents' Council and Family Council meetings help the home to determine the voice of our customers.

In addition to the resident satisfaction survey, the home reviews various other sources to determine opportunities. Some of these other sources include:

- Internal Key Performance Indicators
- Internal audit results including inspection protocols
- Review of new legislation
- Performance data from Canadian Institute for Health Information (CIHI); with a focus on areas indicating a performance decline and/or where benchmarking against the provincial average suggests improvement is required
- Emergent issues identified internally (trends in Critical Incidents, Risk Related issues)
- Feedback from stakeholders including Residents' Council, Family Council, Divisional Advisory Council, external stakeholders including MLTC
- Municipal Benchmarking Network Canada (MBNC)

The home leadership teams also work together with the other three Region of Durham Long-Term Care Homes, and together with the divisional office constructs a divisional strategic plan. This puts forth the strategic direction for the division over the next few years. The plan incorporates initiatives and projects that are in alignment with the Regional Municipality of Durham Strategic Plan. Divisionally, the Long-Term Care Division also seeks input and suggestions from a Divisional Advisory Council which is made up of residents and family members from each home.

Fairview Lodge will then develop a home specific operational plan and a quality improvement plan. The home has a dedicated Interprofessional Quality and Resident Safety Committee (IQRS). The IQRS committee serves as a forum to monitor progress of QI activities, review performance data, analyze program goals and performance measures and to coordinate communication for education and for building awareness for staff, volunteers, residents, clients, and families. This team together with the home's leadership team determines the key priority areas for improvement based on their identified gaps, opportunities, and strategic direction for the year.

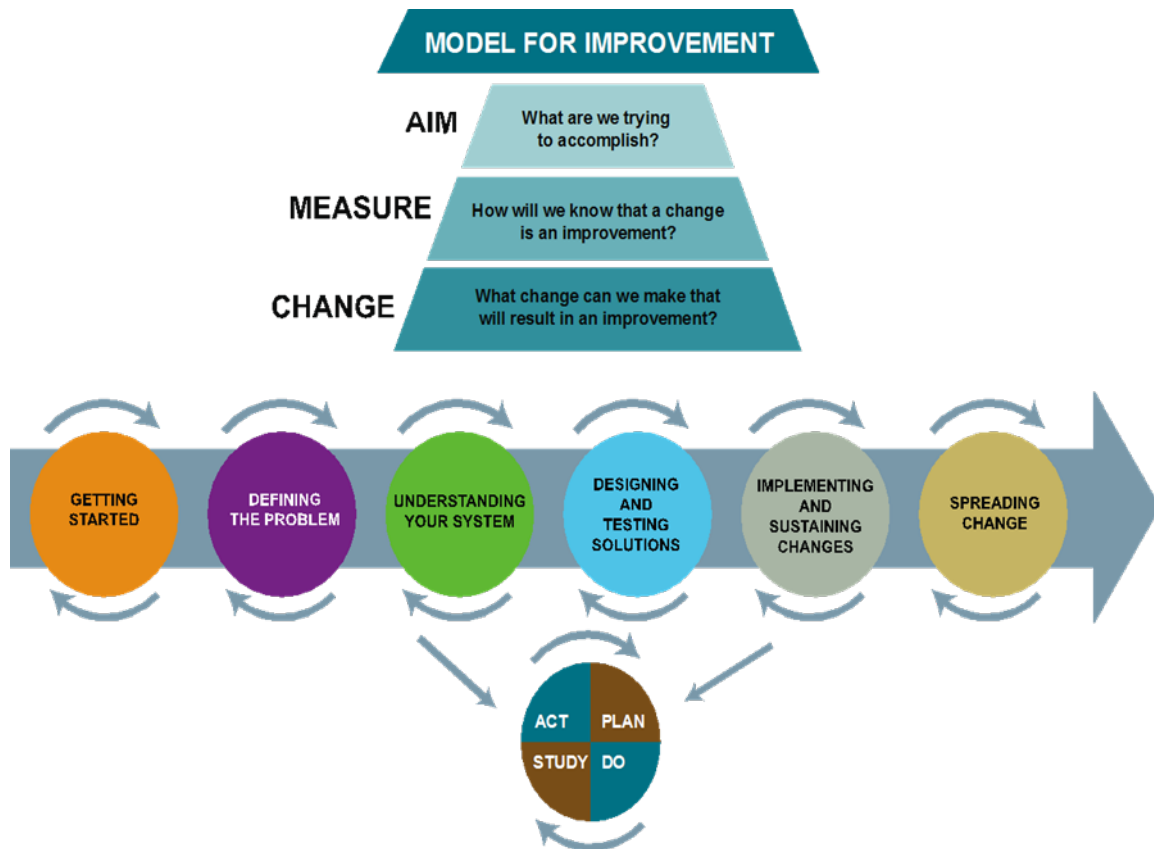
## **Monitoring, Evaluation, and Adjustment**

A key component to quality improvement work is the setting of clear goals. Goals are set that are Specific, Measurable, Attainable, Relevant and Time-Bound (SMART). Once the goals have been established, key performance measures are monitored to ensure the outcomes of the initiatives are trending in the positive direction. If not achieving desired outcomes, the team may consider alternative change ideas, provide coaching to staff to enhance compliance, engage with staff to better understand gaps in compliance, etc. Where feasible the home will use the Plan-Do-Study-Act method of improvement, in which small tests of change are tested and piloted prior to full implementation. This allows the home to be nimble in pivoting improvement ideas when necessary.

## **Approach to Continuous Quality Improvement**

Long-Term Care and Services for Senior policies, combined with practice standards, provide a baseline for staff in providing quality care and service. The Region of Durham Long-Term Care Homes has adopted the Model for Improvement to guide quality improvement activity. Interprofessional quality and resident safety teams, including resident and family advisors, work through the phases of the model to:

- 1) Analyze the problem
- 2) Set Improvement goals
- 3) Develop and Test change ideas
- 4) Implement change and sustain



## Communication

Communication strategies are tailored to the specific improvement initiative. These include, but are not limited to:

- Posting on unit quality boards, in common areas and in staff lounges
- Publishing stories and results on the website, on social media or via the newsletter
- Direct email to staff and families and other stakeholders
- Handouts and 1:1 communication with residents
- Presentations at staff meetings, townhalls, Residents' Council, Family Council, Divisional Advisory Council
- Huddles at shift change
- Use of clinical leads/champions to communicate directly with peers