



# HILLSDALE TERRACES

## Continuous Quality Improvement Annual Report

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### **Designated Leads**

Joanne Iacono, Administrator, Catherine Pazzano, Director, Food Services, Kareen Traill Manager Nursing Practice

Hillsdale Terraces is an accredited Long-Term Care home that provides care and services for 200 residents. It is one of four Long-Term Care homes owned and operated by the Regional Municipality of Durham, Long-Term Care and Services for Seniors. Hillsdale Terraces is committed to the Division's mission of "Strong People, Caring Communities, Our Future" and strives to continuously improve the delivery of care and services for residents while managing risk.

The home is committed to continuous quality improvement and actively refines required programs on a regular basis. This entails developing, implementing, and evaluating new processes to provide high quality care and service to residents in an environment that promotes choice, dignity, and respect. The interprofessional team at Hillsdale Terraces rely on several resources to identify trends/patterns, learn from incidents, improve processes and systems, implement controls, and develop prevention strategies.

### **Determination of Priorities**

Determining the homes priorities each year is an interprofessional process that involves many stakeholders, including staff, residents, families, volunteers, and community partners. The first step is to identify potential gaps in care and service and define opportunities for improvement.

Every year the home conducts a resident/family satisfaction survey. This survey identifies areas of satisfaction and areas they would like to see improved. The resident voice is identified as the most important feedback that the home can obtain. This combined with Residents' Council and Family Council feedback can 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
- External assessments/audit results such as Medication Safety Self Assessment and Accreditation Canada Survey and Inspections.
- 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 necessary.
- 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)
- New best practices identified in the industry.

The Hillsdale Terraces home leadership teams also work together with the other three Region of Durham Long-Term Care Homes, and together with the divisional office develops a divisional strategic plan. This determines 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. The Long-Term Care Division also seeks input and suggestions from a Divisional Advisory Council which consists of staff, residents, and family members from each home.

Hillsdale Terraces then develops home level actions which address areas in the divisional strategic plan. The home has a dedicated Interprofessional Quality and Resident Safety Committee (IQRS). The IQRS committee serves as a forum to monitor progress of Quality Improvement (QI) activities, review performance data, analyze program goals and performance measures and to coordinate communication for education 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**

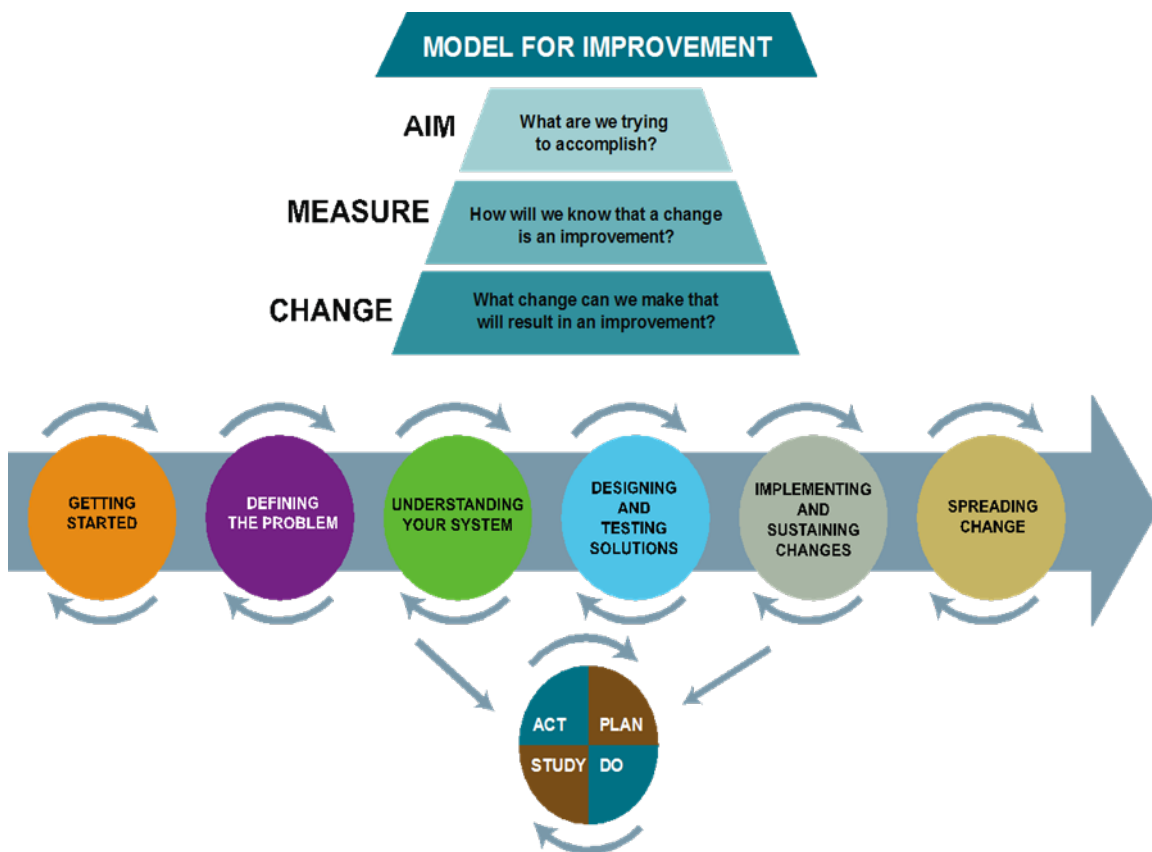
A key component to quality improvement is the setting of clear goals. Goals are set that are Specific, Measurable, Attainable, Relevant and Time-Bound (SMART). Once the goals are established, key performance measures are developed and monitored to ensure the outcomes of the initiatives are trending in 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 flexibility 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 **i**mprovement goals.
- 3) Develop and **t**est change ideas.
- 4) Decide whether to Adapt, Adopt or Discard change.



## **Communication**

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

- Posting on 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
- Department meetings, huddles and unit based meetings.
- Training initiatives
- Use of clinical leads/champions to communicate directly with peers.

## **2023 Hillsdale Terraces Successes**

The following are the successes from Hillsdale Terraces for 2023.

- Resident satisfaction rate for 2023 was 88.1%
- Family satisfaction rate for 2023 was 91%
- Welcomed 60 new resident admissions in 2023.
- Home has 40 active registered volunteers who provided 1861 hours of volunteer service in 2023.
- Hosted 57 clinical student placements.
- Received Accreditation with Commendation through Accreditation Canada.
- Medication Safety Self Assessment score for 2023 was 91%
- Home saw improvements in the following clinical program areas that now have registered staff clinical leads:
  - Falls – 55% improvement in the reduction of harmful falls.
  - Skin & Wound – 60.7% reduction in the percentage of residents with a stage 2-4 pressure injury.
  - Medication Management – 66% improvement in reducing the percentage of residents with antipsychotic drug use.
  - Pain – 77.7% reduction in the percentage of residents experiencing pain during their observation period.
- Implemented Integrated Medication Management in the electronic health record to improve efficiency with medication ordering.
- Trained 74 staff members in Gentle Persuasive Approach.
- Formalized a student preceptorship program and trained all preceptors.
- Introduced new incontinence products.
- Implemented MealSuite Touch technology in all home areas.
- Participated as a trail blazer home in the Institute of Safe Medication Practices (ISMP) quality improvement initiative. The home project focused on medication reconciliation.
- Participation in Project Search program with Durham District Catholic School Board (DDCSB) and Abilities Centre.
- Presented at the Together We Care Conference to share knowledge and leadership on “An Interdisciplinary Approach to Palliative Care and End of Life Care in Long-Term Care” with other long term care homes in Ontario.

- The BSO team was recognized for their work in the Advanced Gerontological Education Newsletter – GPA Coach Approach.
- Launched Peer Support Group to provide monthly drop-in social work hosted sessions to help caregivers build connections, enhance coping skills and well-being and foster hope and empowerment.

## **2024 Quality Improvement Initiatives**

Each year as per the Ministry of Long-Term Care and Ontario Health requirements, Long Term Care homes are required to submit a quality improvement plan (QIP). This plan incorporates priority areas which the home has identified.

In addition to the QIP submission, the home has identified many other QI projects. The details of the QIP and additional quality initiatives for 2024/25 are listed below.

### **2024/25 Hillsdale Terraces QIP submission:**

- 1. Improve the percentage of staff who have completed relevant Diversity, Equity, and Inclusion (DEI) and anti-racism education. This will be achieved by:**
  - Incorporating four modules of DEI Foundations Education as a part of mandatory training during new staff on-boarding training and education. The four module topics include Privilege, Systemic Injustice, Bias, and Colonialism.
- 2. Improve the residents' rating of the overall care and services they experience at Hillsdale Terraces.** This will be achieved by focusing on two areas determined to be key drivers of resident overall satisfaction.
  - The Recreation department will be exploring opportunities to improve residents' social life at Hillsdale Terraces through expanding opportunities for meaningful activities and social connections in consultation with Residents' Council and resident focus groups. This includes increasing opportunities to explore new skills and interests, availability of meaningful activities on evenings and weekends and opportunities to spend time with other like-minded residents.
  - Hillsdale Terraces will be implementing opportunities to enhance the approach to care within the Home. This includes sharing residents' life stories with the care team, training all staff on "Dignity in the Details" education and full implementation of Intentional Rounding in all home areas.

**3. Reduce the number of residents being treated with antibiotics for urinary tract infections each month. This will be achieved by:**

- The Nurse Practitioner and Infection Prevention and Control Practitioner will provide nursing staff with education and training on the Public Health Ontario UTI program through interactive lunch and learn sessions. The program will also be presented to Family Council, Medical Advisory and Professional Advisory Committees.
- Following education of the UTI program based on best practices, Hillside Terraces will be providing all home areas with a resource binder and resources on the UTI program, including the UTI algorithm.

**4. Reduce the percentage of residents experiencing harmful falls. This will be achieved by:**

- The Falls clinical lead and Occupational Therapist will conduct bed height assessments to determine the appropriate height for resident beds to reduce the risk of harmful falls from bed.

## **Additional Quality Improvement Initiatives**

In addition, after evaluating all program areas and setting actions for the operational plan, Hillside Terraces has identified the following improvement activities:

- Improve staffing consistency through increasing our full time to part time staffing ratio by converting part time hours to full timelines.
- Train an additional 80 staff members in Gentle Persuasive Approach
- Train all staff members in a 2-hour Dignity in the Details course
- Introduce a cook/serve food service model incorporating more local, seasonal, and homemade foods that residents enjoy.
- Reduce the paperwork burden on admission day by introducing a new software program for residents and family members.
- Continue to work on medication safety initiatives such as the introduction of secured conversations, printable three-month medication reviews, lab results integration.
- Continue to work on improved resident satisfaction in social life through providing more opportunities for independent social interaction amongst residents.
- Continue to work on Diversity, Equity and Inclusion through training programs and the development of an interfaith prayer room.