Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.
Overview
Baycrest is pleased to share our Quality Improvement Plan (QIP) with our residents, family members and community. This plan describes the key actions for making improvements in the care and services we provide.

This year, we launched our Strategic Plan for the next five years titled, "Inspired Aging". This plan links every part of our organization to a common set of goals, which are guided by shared values and a new vision for the future. Our Strategic Plan reflects the understanding that what makes Baycrest extraordinary for clients, residents and employees is the combination of all these aspects—our spectrum of excellent health care services, best-in-class education and research programs, and wide-ranging local and international partnerships.

Our annual quality improvement plan is directly linked with our Strategic Plan as it describes the key improvement actions for delivering on our goal to provide an exceptional person and family centred healthcare experience. As we do each year, our annual improvement priorities are selected considering a number of important factors that include:

- Issues identified by focus groups, resident surveys, and Resident and Family Councils;
- Resident safety priorities identified from safety reporting, quality of care reviews, critical incidents and risk analysis;
- Staff safety priorities identified from internal data collection sources, employee engagement surveys and client safety culture surveys;
- Geriatric best practices;
- Provincial and Local Health Integration Network priorities and other Ministry of Health and Long Term Care legislative requirements;
- Identified health system priorities; and
- Accreditation Canada required organizational practices and standards

Our main improvement themes for this year reflect the priorities for our organization, as well as priorities that impact the broader healthcare system. It is important to understand that this plan is just one of the tools we use to capture our top improvement priorities and monitor our performance.

The improvement goals in our annual improvement plan include:

1. **Improve the resident’s quality of life.** Over the next year, the Apotex is committed to introducing strategies, based on input from our residents and families, to improve the residential living experience and overall quality of life.

2. **Reduce potentially preventable visits to the Emergency Department.** Visits to the Emergency Department can cause additional healthcare risks, breakdowns in care coordination, and undue anxiety for residents and their families. The Apotex actually has one of the lowest Emergency Department transfer rates in the Toronto Central Local Health Integration Network and in the Province. This is achieved by collaborative work with our point of care staff and system partners, in order to further reduce our rate of potentially preventable transfers.

3. **Ensure timely response to complaints.** Having a simple and responsive process is important to residents and families. It is our goal to keep our residents and families informed of the progress in a timely manner.

4. **Deliver effective care for residents who may benefit from palliative care.** Palliative care is a philosophy of care that aims to relieve suffering and improve quality of life for people with a progressive, life-limiting illness, and for their families and caregivers too. This is a new improvement goal for the Apotex. Over the next year, we are committed to ensuring that palliative residents’ needs are identified through a comprehensive and holistic assessment.
Describe your organization's greatest QI achievement from the past year

In the past year, Baycrest was successful in implementing numerous quality improvement initiatives that have had a direct and significant impact on the client experience and quality of care. Some highlights of our successes are described in this section of the narrative, although they reflect only a snapshot of our accomplishments.

In the Apotex (long term care home), the greatest quality achievement this year is the implementation of the new electronic health record system, PointClickCare (PCC). PCC is the gold standard for electronic health records in the LTC sector. We also simultaneously implemented an Electronic Medicine Administration Record (EMAR). This EMAR was the first-ever physician order entry module to be implemented by PCC in any LTC facility in Ontario. The EMAR allows faster and more accurate transcription of resident prescriptions by physicians.

Another success was the establishment of the Acute Care and Emergency Review (ACER) team. This initiative was developed last year to prevent unnecessary emergency department (ED) transfers. During these meetings, point of care staff and administrative leadership track monthly unplanned transfers to the ED as well as tracking Ministry of Health and Long Term Care transfer data. As a result of the ACER meetings, several actions have been implemented. These include strategies to manage seizures and the development of a catheter/flushing strategy, which has helped point of care staff prevent potential ED transfers. Participation in ACER meetings has allowed staff members to review their practice and use it as a learning opportunity to enhance and improve current practices. We have brought on a new physician to help with the program. We also partnered with the Centre for Learning Research and Information (CLRI) to enhance the PSWs’ communication skills in the Apotex. As a result of these efforts, our home’s ED transfer rate has improved. We are extremely proud that the Apotex has one of the lowest Emergency Department transfer rates in the Toronto Central Local Health Integration Network and in the Province.

We also developed the LTC Smart Suites concept. These suites have integrated Alexa voice commands in the room to allow residents to control aspects of their environment using only voice commands. They can adjust lights, temperature, and other aspects of the room by simply speaking various commands. The incorporation of this technology allows residents greater control and independence over their home space as they do not need to rely on staff for things that voice commands can accomplish. We are looking at ways to replicate the LTC Smart Suites concept in other rooms and incorporate the best aspects of that room to other parts of the home.

The home has also implemented purposeful rounding by PSW staff. The PSW staff check on residents in the Apotex on a consistent basis. Purposeful rounding is a strategy to help reduce falls in the home and helps to increase resident satisfaction. In addition, support staff in the home received training on a resident centred communication strategy called ‘AIDEIT’ (Acknowledge, Introduce, Duration, Explanation, and Thank You) as they greet residents in the home. All of the initiatives described above all help to enhance resident care and experience and contribute to excellence and best practices in senior care.

Patient/client/resident partnering and relations

In order to provide care that is meaningful and of the highest quality, we are committed to listening to our residents and families and working in partnership with them. Over the past year, we sought input and feedback in our annual improvement priorities from members of the Resident and Family Advisory Councils. We are also the lead organization for the Seniors Quality Leap Initiative (SQLI), a consortium of leading care organizations throughout Canada and the United States. Being part of this group allows us to collaborate and benchmark with our peers in quality of care and quality of life indicators and continuously work to improve the quality of services we provide. Over the past year, as part of SQLI, Baycrest conducted two focus groups with twenty long term care residents to hear their perspectives on their experiences and quality of life. The feedback generated has helped to inform our improvement initiatives this year, including how staff can meet resident’s needs, and we hope to share these themes across the SQLI network and the broader long term care sector.

In developing this year’s plan, we continue to engage the Resident and Family Advisory Councils to listen to and incorporate their input and feedback, and we will continue this collaboration throughout the year. Family members were also engaged and are active participants in working groups to develop change ideas. Additional participation from Resident and Family Advisory Council members was requested to test and implement change.
ideas. Furthermore, based on SQLI feedback from residents, specific improvement initiatives have been proposed to meet residents’ needs and provide an excellent resident experience while maintaining a high quality of care.

Workplace violence prevention
In 2018, Baycrest embarked on a new strategic plan, where our mission includes delivering a highly personalized and comprehensive approach to wellness promotion and health care because of the dedication and talent of our staff and our passionate commitment to education, research, innovation and quality improvement.

One of our strategic goals is to provide an exceptional person and family-centered residential and healthcare experience; we believe that a high quality employee experience is an integral aspect of this. Our employee experience includes making employee safety a strategic priority and is foundational. Baycrest is committed to providing a safe environment for all staff, volunteers and physicians. Workplace violence prevention has been a key priority within Baycrest’s overall health and safety management system for a long period preceding the advent of Bill 168 in 2010. A relentless focus on this priority at the highest level of our senior management is critically important to our overall safety culture.

At Baycrest, we believe it is essential to continue to build a culture that supports reporting of all incidents by all staff, including near miss, no harm, first aid, medical aid and critical injury. Due to the nature of our work, the risk of violence will always exist; however, increased reporting will build our systems and processes to help prevent severe incidents. We monitor people-related key performance indicators, including lost time injuries as related to the Workplace Safety Insurance Board.

Our change ideas balance our need to support the culture of reporting while, at the same time, aiming to ensure we reduce the risk/severity of any workplace violence incident through prevention. This year, our goal is to increase reporting of incidents by 5%; surpassing this goal will indicate success in our culture of reporting.

It is important for Baycrest to understand the key issues and opportunities to improve workplace violence prevention. Baycrest continues to invest in conducting Workplace Violence Risk Assessments once every 3 years. In 2018, the Public Services Health and Safety Association partnered with Baycrest to complete this risk assessment. The scope of the report included all of Baycrest’s facilities and benchmarked our performance on workplace violence against the Occupational Health and Safety Act and relevant best practices in Healthcare and across other industries. The recommendations arising from the Risk Assessment will be a priority for Baycrest in 2019/20 and will be used to develop a three year workplace violence prevention action plan. In 2019, Baycrest will progress further in our journey of workplace violence prevention by conducting a psychological safety survey of our staff.

In order to monitor our progress with respect to workplace violence, the Joint Occupational Health and Safety Committee receives reporting of any incidents of workplace violence that can be monitored and reviewed to support continuous learning for the organization to improve performance.

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