

Let's Make Healthy
Change Happen.



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



Perley Rideau

The Perley and Rideau
Veterans' Health Centre

3/29/2019

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.

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Overview

The Perley and Rideau Veterans' Health Centre (Perley Rideau) is a not-for profit seniors' care organization with 450 provincially licenced long-term care beds. While the Perley Rideau's primary focus is on long-term care, it also actively supports the capacity of seniors to live independently. To this end, the Perley Rideau partners effectively to develop a community of care and to provide ready access to a range of clinical and therapeutic services, along with social and recreational activities.

Perley Rideau is pleased to share its 2019/20 Quality Improvement Plan (QIP). Perley Rideau's primary focus is Excellence in Care and Service. Our commitment to quality is reflected in our mission "to achieve excellence in the health, safety and well-being of Seniors and Veterans with a focus on innovation in person centred and frailty-informed care and service" and in our supporting strategic plan, which was updated in 2017 to better reflect the evolving healthcare landscape.

Perley Rideau has entered a period of significant challenge and opportunity. The population of World War II and Korean veterans is declining. As a result, Perley Rideau's mandate to provide long-stay residential care for veterans of World War II and Korea is evolving. Ontarians are aging and have more complex health needs. Resources are limited. The healthcare system must learn new ways of delivering higher quality care at lower cost. Perley Rideau must determine how it can continue to provide the highest value to its community.

The QIP is a roadmap to achieving excellence in care and service, while navigating challenges and opportunities in our environment. Perley Rideau's QIP is aligned with our annual operating plan and supported by our measurement and accountability systems. This alignment allows us to effectively clarify priorities, direct resources, monitor progress and act on results.

The overall objectives of Perley Rideau's QIPs have remained largely consistent from year to year. Maintaining focus allows us to build on work completed as well as sustain and spread improvements achieved during the previous QIP cycles (2015/16 - 2018/19).

Prioritization within the QIP, targets for improvement and projected change ideas/tactics for each objective have been refined to reflect:

- progress achieved in 2018/19;
- the most recent performance data available from the Canadian Institute for Health Information (CIHI), resident and family experience surveys and our electronic health record;
- emergent issues identified internally (trends in critical incidents) and/or externally
- input from residents, families, staff, leaders and external partners, including the MOHLTC.

Priorities are divided into 3 categories - priorities for focused action, moderate action and monitoring. Please note that targets reflect a blended average for both our community and veteran residents.

Priorities for Focused Action:

- 1) Reduce the percentage of residents who had a worsening pressure ulcer from 3.9% to 3.0%
- 2) Reduce the percentage of residents with worsening behavioural symptoms from 20.3% to 19.0%
- 3) Reduce the percentage of residents who experienced worsening pain from 19.0% to 17.5%
- 4) Reduce the number of staff to resident incidents of abuse/neglect that are reported to the MOHLTC from 9 to 0.

Priorities for Moderate Action:

- 5) Reduce the percentage of residents on antipsychotics without a diagnosis of psychosis from 17.4% to 15.0%
- 6) Maintain or increase the percentage of residents who would positively recommend Perley Rideau to others (currently 82%, target at or above 85%). Target of 85% remains unchanged for 2019/20, as Perley Rideau will focus on sustaining consistently high performance in this area.

Priorities for Ongoing Monitoring:

- 7) Reduce the percentage of residents who had a fall in the last 30 days from 20.2% to 19.5%
- 8) Reduce the number of potentially avoidable ED visits per 100 residents from 13.3 to 13
- 9) Reduce the use of daily physical restraints from 11.7% to 6.4%.

Perley Rideau continues to identify modest improvement targets in recognition that the standardized QIP indicators used for long-term care in Ontario are lagging indicators, and are calculated using a rolling four quarter average. The baseline data used for the 2019/20 QIP reflects performance for the time period October 2017 to Sept 2018. We have adopted a multi-year cycle for our QIP, recognizing that a phased approach to change will increase the likelihood of sustained improvement.

Describe your organization's greatest QI achievement from the past year

Sub-Acute Care for the Frail Elderly (SAFE) Unit

Perley Rideau opened a 20 bed sub-acute unit for the frail elderly at the end of March 2018, known as SAFE. The SAFE program is a new and innovative level of care designed to serve frail older patients who are at risk of deconditioning and/or disability associated with prolonged hospitalization, but, who may safely return home or to retirement home following up to 4 weeks of sub-acute care in a restorative environment. The level of care in the SAFE unit is higher than a traditional long-stay or convalescent long-term care bed. SAFE clients are medically complex, requiring medical supervision and regular adjustment to the care plan to optimize medical status.

While at the Perley Rideau, SAFE clients access appropriate clinical and rehabilitative therapies and services until they are well enough to return home. The SAFE Unit is founded on the premise that addressing the medical and restorative needs of these patients at the Perley Rideau is likely to produce better health outcomes, save the healthcare system and free up hospital beds for acute-care patients.

The SAFE Unit was conceived in 2016 through a partnership involving the Perley Rideau, The Ottawa Hospital (TOH), and the Champlain Local Health Integration Network (LHIN) Home and Community Care. Collaboration amongst partners is ongoing to continuously identify and eliminate barriers to timely admissions and discharges for the SAFE unit.

INNOVATIVE SUB-ACUTE CARE

The Perley and Rideau Veterans' Health Centre

Summary data is based on the first 8 months of the SAFE Unit

Sub-Acute Care for Frail Elderly (SAFE) is a new and innovative level of care that promises to improve the health and well-being of frail elderly patients hospitalized due to surgery, illness or accident. While at the Perley Rideau, these medically complex patients access clinical and rehabilitative therapies and services avoiding the decline that can happen in hospital. Caring for these patients at the Perley Rideau supports Ontario's *Aging at Home* strategy and is designed to free up hospital beds while saving millions for the healthcare system. The SAFE model is scalable and replicable, and could transform how the health care system cares for frail elderly.

Early Identification

8.5

3.8 Days
(avg.)

Time Span from Perley Rideau Case Review to Admission

Patient Centred Care

17.8

18.7 Days
(avg.)

Length of Stay

125
Patients served in 32 weeks

LTC Bed Savings

\$185

\$416K

Minimum Savings Over 8 Months

Specialized Care

84
Staff

2370
Hours Training

Training:
- Chronic Conditions
- Infusion Therapy
- Critical Event Simulations

Patient Profile

60+

Mild/moderately frail

Common Diagnoses:

- Heart Disease
- Infection
- Lung Disease

Enhanced Restorative Care

- Occupational Therapy
- Physiotherapy
- Spiritual Care
- Therapeutic Recreation and Creative Arts
- Resident Care Liaison Support

High Quality Care

7 → 30

7 Days & 30 Days

Staff phone calls to follow up

80%

Appointment with Doctors within 30 days

98%

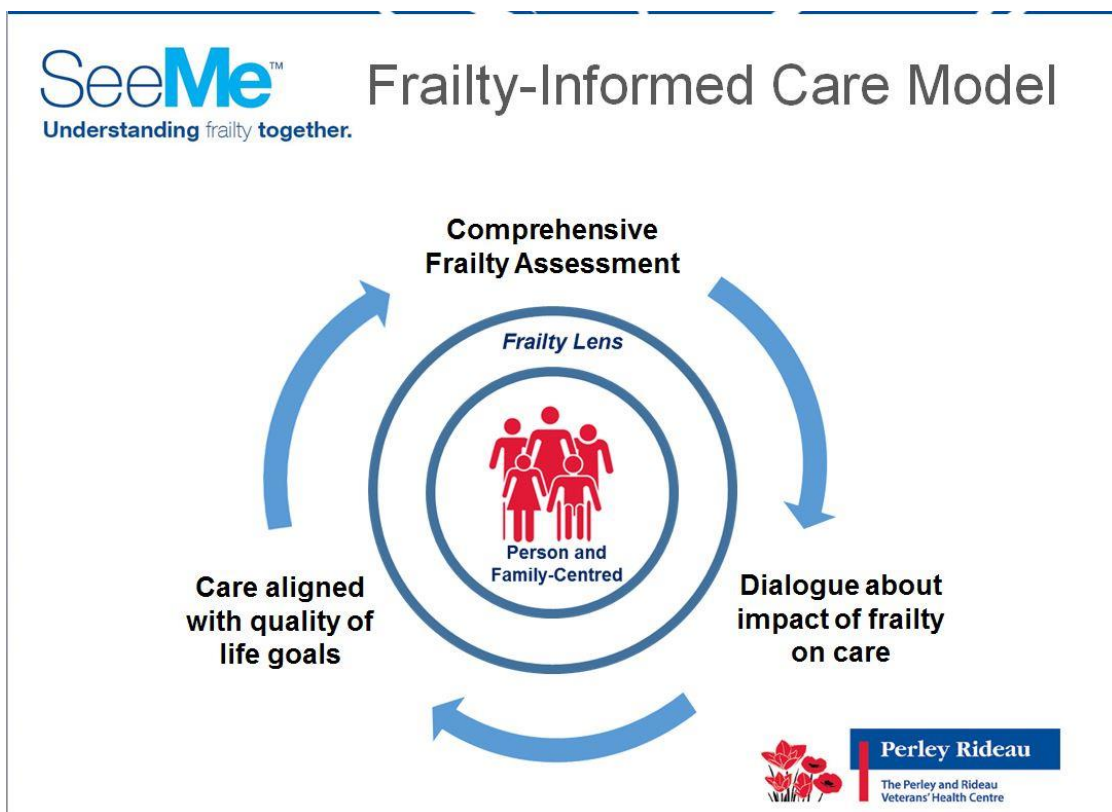
Patients Recommend The Program

Frailty-Informed Care

Frailty is now recognized as a strong predictor of health outcomes. At Perley Rideau, we believe that understanding and recognizing frailty is crucial to providing good care. That's why we've developed SeeMe: Understanding Frailty Together™. SeeMe™ is a program that recognizes and assesses frailty as part of a person's overall health and supports residents and their families to make informed decisions around treatment that may be helpful or harmful within the context of frailty. The program involves a true partnership between the healthcare team and the resident/family in terms of considering the whole person and what matters most to them as an individual. SeeMe™ aims to align care with quality of life goals, with a true understanding of what a quality life means to individuals.

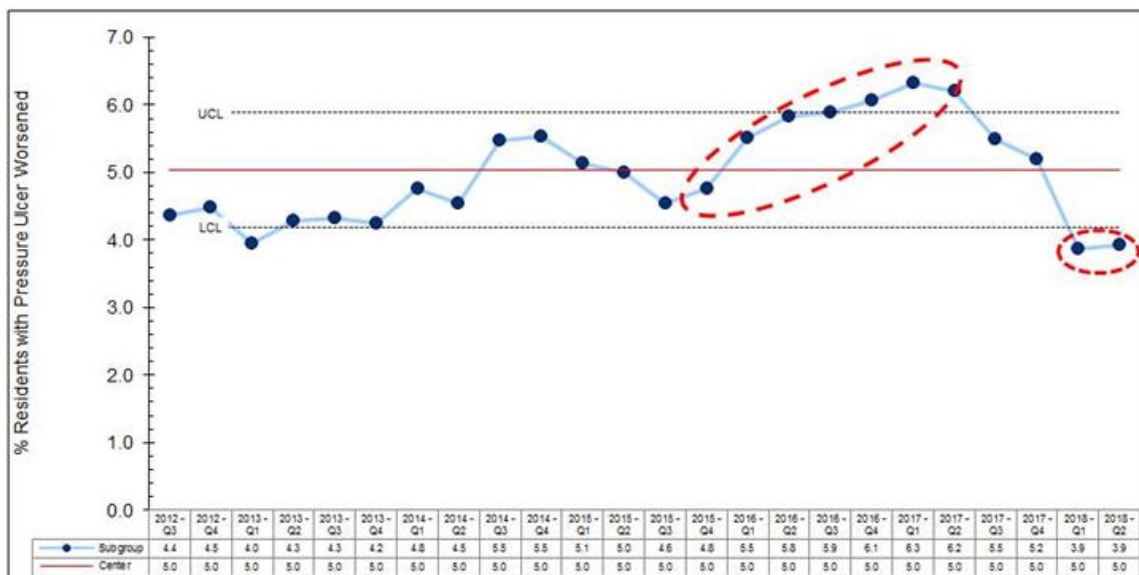
The program features a Comprehensive Frailty Informed Assessment, which provides a detailed overview of different drivers of frailty, including the major drivers of cognition, function, and mobility, and assigns an overall Clinical Frailty Scale score. The program also includes a standardized approach to care conferences, where the care team and resident/family can discuss the overall health picture and considerations for future decision-making. The new approach to care conferences includes a shift away from Advanced Directives and levels of care, replacing them with Goals of Care and Future Health Preferences, aligning the discussion with Advanced Care Planning principles and the legal context related to informed consent.

Roll-out of SeeMe began February 1st, with the new care conference structure with embedded Goals of Care discussion implemented home-wide, and the full care program implemented on 2 long-stay units. A phased approach will be used to implement the full care program on the remaining long-stay units throughout 2019.



RNAO Best Practice Spotlight Organization (BPSO)

BPSO is a designation program developed by the RNAO to work with health care facilities, in order to create evidence based cultures in the work place. In April 2016, Perley Rideau was accepted into the program as a pre-designate. Now in its third and final year, Perley Rideau has successfully completed all required deliverables for earning official BPSO designation at the end of March 2019. Over the last 3 years, Perley Rideau has worked with the RNAO and other BPSOs to implement four Best Practice Guidelines addressing the areas of pain management; falls prevention; skin and wound management; and screening for delirium, dementia and depression. By putting the latest research into practice, reducing variation in care and eliminating interventions that have little effect, the initiative promises to further improve the quality of care delivered to residents of the Perley Rideau and of other long-term care facilities. One such area where the home has seen statistical evidence of improvement is pressure injuries. As indicated in the graph below, worsening pressure injuries have decreased from 6.3% to 3.9% over the last 5 quarters.



Patient/client/resident partnering and relations

Perley Rideau has three active councils focused on resident and family experience - the Veteran Residents Council, the Community Residents Council, and the Family and Friends Council (FFC). The councils are a valuable forum for collaboration and engagement. The leadership team and councils enjoy a positive and productive relationship. Members of the Management team are invited to, and attend, all council meetings. In addition, at least one Executive leader attends all meetings of the FFC Executive. The FFC Exec elects one of its representatives to be a standing member of the Board Quality and Safety Committee. The Chair of the Veteran Residents Council is a member of the Veteran Liaison Committee.

The Management team routinely seeks feedback and involvement from the councils regarding various aspects of the Perley Rideau's operations such as the annual resident/family experience surveys, annual budget, operating plan and quality improvement priorities. Co-design methods are frequently used, most recently in the development of the updated care conference structure with embedded Goals of Care and Future Health Preferences discussion.

In an effort to further formalize resident and family engagement in quality improvement activities, a Resident and Family Advisor Program was piloted during the summer of 2016. The goal of this program is to promote resident and/or family participation on all of Perley Rideau's QI projects, and other initiatives, as appropriate. This program was further expanded in 2017/18, with resident/family advisors successfully matched with all active QIP teams as well as other initiatives across the Home.

Results of the annual interRAI Quality of Life Survey and Family Experience Survey are brought to the FFC and Residents Councils, providing a platform for the Councils to further inform the final QIP.

Workplace violence prevention

Perley Rideau is committed to providing a safe and healthy work environment for staff, and has identified workplace violence as a significant organizational risk. As such, the Perley Rideau has a number of measures in place to minimize the risk of incidents, appropriately address all reported incidents, and prevent re-occurrences.

1) Robust policies and procedures that cover all aspects of staff safety, including a comprehensive Violence Prevention policy. This policy outlines the key measures in place to monitor, address and prevent workplace violence, including regular education for staff, prompt investigation and follow-up of all incidents, identification and communication of hazardous situations, as well as implementation of corrective actions. Roles and responsibilities are clearly outlined within the policy, which is revised annually.

In 2018, the Home collaborated with an external subject matter expert to develop Anti-Bullying education. A train-the-trainer approach was used for the education, with the consultant delivering initial education sessions to Management and staff. Education sessions have been delivered in small group sessions to encourage staff engagement and discussion.

2) An active Joint Occupational Health and Safety (JOHSC) committee. Perley Rideau's JOHSC has a mandate "to identify, assess and control workplace hazards and make recommendations to the workplace to prevent injuries and illnesses". The JOHSC achieves this mandate through regular review and discussion of workplace incident data, and annual completion of a workplace violence risk assessment tool. The JOHSC will either address an issue directly (as appropriate), or make recommendations to the Management Team when further actions are required to minimize identified risks. The JOHSC plays an integral role in the development, implementation and reviews of Perley Rideau's Violence Prevention Policy.

The JOHSC has identified resident to staff responsive behaviours (both verbal and physical) as one of the contributors of violence in the workplace and follows these incidents diligently. The JOHSC has done work in this area to improve the reporting and incident follow-up process, but has deferred further improvement work to the 3Ds QIP Team. Although the main objective of the 3Ds QIP team is to minimize the occurrence of resident responsive behaviours to improve quality of life for residents, the team's work should also result in a decreased risk of violence for staff, and an overall improvement in staff work life.

3) The Home's Code White (physically responsive resident) and Code Silver (threatening person) emergency responses are revised and tested on an annual basis.

4) Regular discussion of Safety-related issues at the Management level. Safety is included as a standing item on the Management team's bi-weekly agenda.

Contact Information

For additional information about our 2019/20 QIP, please contact:

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Sign-off

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan

Board Chair / Licensee or delegate  (signature)

Administrator /Executive Director  (signature)

Quality Committee Chair or delegate  (signature)

Other leadership as appropriate _____ (signature)