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Quality Improvement Plan (QIP) Narrative for The Perley and Rideau Veterans' Health Centre



Perley Rideau

The Perley and Rideau
Veterans' Health Centre

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 pleased to share its 2018-19 Quality Improvement Plan (QIP). Perley Rideau's primary focus is Excellence in Resident Care and Services. 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 provide the highest value to its community.

The QIP is a roadmap to achieving excellence in resident care and services, 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 unchanged 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 - 2017/18). Notable additions to this year's QIP include:

- 1) "Eliminate the Risk of Resident Abuse" is a new priority for focused action, with resident abuse/neglect by staff identified as a "never event" at the Perley Rideau
- 2) Resident and Family Relations, with a focus on targeted improvements to the Home's complaints management process, has been included as a key tactic under the "Improve Resident Experience" objective
- 3) Objectives and tactics previously found under the Home's Client Safety Plan (2014-2017), e.g. Medication Management and Infection Prevention and Control, are now embedded within the QIP

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

- progress achieved in 2017/18;
- 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 6.2% to 3%
- 2) Reduce the percentage of residents with worsening behavioural symptoms from 20.3% to 19%
- 3) Reduce the percentage of residents who experienced worsening pain from 17.1% to 15.0%
- 4) Reduce the number of staff to resident incidents of abuse/neglect that are reported to the MOHLTC from 4 to 0.

Priorities for Moderate Action:

- 5) Reduce the percentage of residents who had a fall in the last 30 days from 18.5% to 18%
- 6) Reduce the percentage of residents on antipsychotics without a diagnosis of psychosis from 15.1% to 12.0%
- 7) Maintain or increase the percentage of residents who would positively recommend Perley Rideau to others (currently 87%, target at or above 85%). Target of 85% remains unchanged for 2018/19, as Perley Rideau will focus on sustaining consistently high performance in this area.

Priorities for Ongoing Monitoring:

- 8) Reduce the number of potentially avoidable ED visits per 100 residents from 15.14 to 15
- 9) Reduce the use of daily physical restraints from 6.7% to 5.5%.

Perley Rideau continues to identify incremental improvement targets in recognition that the standardized QIP indicators used for long-term care in Ontario are lagging indicators. There is an approximate 1 year delay between current performance and reported performance. The baseline data used for the 2018/19 QIP reflects performance for the time period October 2016 to Sept 2017. We have adopted a multi-year cycle for our QIP, recognizing that a phased approach to change will increase the likelihood of sustained improvement. We anticipate metric improvement will be achieved and maintained in most priority areas by the end of this QIP cycle. Our 3-year targets are to be at, or better than the provincial average in all priority indicators.

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

In 2018/19, Perley Rideau saw clinical improvement in a number of areas identified in the QIP; with evidence of metric improvement becoming evident in some areas. Highlighted below are some of the key improvements from the past year.

Reducing Resident Falls

Following the intensive improvement event in 2015 (known as a Kaizen), the team tested and implemented an evidence-based fall assessment/screening tool (Scott Fall Screening Tool) and process across all 12 units. This tool enables consistent and accurate identification of a resident's risk for falls, and helps the interdisciplinary team identify appropriate interventions to protect the resident. The team has also implemented the post fall huddle tool and process; developed and distributed resident/family education materials in partnership with residents and families; and developed and distributed medication cheat sheets for PSWs. In 2017, the team continued to test and revise team communication tools and mechanisms (e.g. transfer logos). The Home has started to see metric improvement in this area, with the falls rate improving from 21.8% to 18.5% since implementation activities started across the Home. In 2018/19, the team will focus on sustaining this improvement.

Assessing and Managing Responsive Behaviours

The Delirium, Dementia & Depression (3Ds) QI team conducted a gap analysis against the RNAO's 3Ds Best Practice Guidelines as part of its current state analysis. Over the past 12 months, the team has introduced a revised Mini Mental Status Examination (MMSE) tool, and focused on the appropriate administration and scoring of the MMSE. The team also spread monthly resident high risk meetings across the Health Centre. These interdisciplinary meetings have been very successful in identifying residents who are high risk for responsive behaviours. The discussion focuses on a team approach to identifying an individual resident's triggers, interventions and follow up that is required by the team. The team also piloted and implemented a new evidence-based tool and process for monitoring antipsychotic medications on 2 units. The team is currently testing Antecedent-Behaviour-Consequence (ABC) Huddles at shift report on one unit to promote the discussion of behaviours in a standardized way at regular intervals [admission, quarterly] and as behaviours change, with the goal of driving timely care plan changes.

Pain Management

A Kaizen Event was held in spring 2016. Since that time, the team developed, tested and implemented two evidence-based pain assessment tools, one for use with cognitively impaired residents and the other for cognitively intact residents; pain mapping tool; admission screening tool; educational materials; and non-pharmacological interventions list.

Palliative and Therapeutic Harmonization (PATH)

PATH is a process that helps older people and their families understand their health status and guides them through the process of making health care decisions that protect their best interests and quality of life. It is a frailty-informed philosophy of care that can be used across the healthcare continuum. Perley Rideau piloted PATH on two residential units in 2016/17, and although some issues were identified, many positive outcomes were identified. Notably, family members that participated in the pilot were pleased with the PATH process and felt more informed, empowered and supported in making health care decisions for their loved one. In 2017, the Home focused on learning from the pilots, building capacity to support PATH across the Home, and planning for future testing and spread in 2018/19.

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, and must achieve very specific milestones by the end of the 3-year term (March 2019) to be granted full designation. During this time, Perley Rideau will work with the RNAO and other BPSOs to implement four Best Practice Guidelines addressing the areas of Falls, Pain Management, Pressure Injuries and Caring for Residents with Delirium, Dementia and Depression. Participation in this rigorous program will increase Perley Rideau's capacity to support the implementation and sustainability of evidence based practice at an accelerated pace.

Resident, Patient, Client Engagement

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 have been used, particularly for designing communication tools. In an effort to further engage residents and family members 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.

A draft of the QIP was brought forward to the FFC Exec as well as the Residents Councils for discussion and review. Feedback was very positive, and members' priorities for improvement are reflected in the final QIP.

Collaboration and Integration

Perley Rideau's strategic plan calls for new models of care and collaboration across the continuum to provide residents, clients, tenants and the broader community with high quality, cost effective care and services. We are working with numerous partners to advance integration and continuity of care. Highlights include:

Approval and establishment of a Sub-Acute unit for care of the Frail Elderly (SAFE collaborative), a partnership between The Perley and Rideau Veterans' Health Centre, The Ottawa Hospital and the Champlain LHIN:

SAFE is focused on providing restorative, frailty informed care to seniors following an acute hospital stay to enable their timely and safe return to the community. The program, which began accepting admissions March 27, 2018, includes intense collaboration between an acute care hospital and long-term care home, with physicians from the hospital providing medical care to patients on the SAFE Unit. The initiative includes enhancements to diagnostic support (lab, x-ray) in the long-term care setting, which will be available to both short-stay sub-acute patients and long-stay residents, with a focus on building capacity and improving continuity of care for frail seniors. This initiative will decrease the risk of extended hospitalization for frail patients (those at risk of becoming ALC), minimize the risk of hospital-acquired complications, improve resident quality of life, decrease ED wait times and provide cost savings for the health care system and patients/families.

Partnership between the Perley and Rideau Veterans' Health Centre, The Royal Ottawa Hospital, Champlain LHIN and Behavioural Supports Ontario to re-establish a Specialized Behavioural Support Unit (SBSU) within the Champlain LHIN: SBSUs have been established across Ontario to support persons with complex and challenging responsive behaviours. SBSUs provide specialized support for older adults whose behaviours have become unmanageable in their current setting; and stabilize behaviours and provide care until residents can safely return home, whether in another long term care home or in the community. These specialized units provide care to residents 65 years or older that have cognitive impairments due to dementia, mental illness, or other neurological conditions, with associated complex and challenging responsive behaviours. The Champlain LHIN's new 20-bed SBSU will be located at the Perley Rideau, with admissions projected to begin April 2, 2018.

Expansion of the Seniors' Village

The Seniors' Village at Perley Rideau continues to grow and evolve with a goal of integrated services for seniors that will meet the majority of their health and social needs. In 2015, several primary care physicians working in the long-term care home began offering house call medical services to tenants on our campus. A dermatology clinic also opened. In 2017, Perley Rideau continued to work in partnership with University of Ottawa Health Services to open a comprehensive primary care clinic to meet the needs of both our Seniors' Village residents and members of the broader community. Perley Rideau also continued to work with University of Ottawa's Faculty of Health Sciences and University of Ottawa Health Services to launch the uOttawa Centre for Interprofessional Health Care and Research. The strategic areas of the uOttawa Centre are interprofessional health care services, applied learning in the form of health care student placements, continuing education in the form of courses for clinicians and community members, and innovative research conducted in an applied health care setting. The vision is to be recognized as a leader in fostering interprofessional collaboration and innovative practices in health care, education and research to continuously improve the delivery of person-centred care. Opportunities for Perley Rideau stemming from the uOttawa Centre for Inteprofessional Health Care and Research include enhanced academic and research affiliation, potential collaborations between Perley Rideau services and uOttawa Centre initiatives, enhancement of Senior Village services through the provision of private rehabilitation and health services, expansion of the continuum of care at Perley Rideau, and enhanced integration with the community surrounding Perley Rideau by offering needed health services. It is anticipated that the primary care and uOttawa Centre for Interprofessional Health Care and Research clinics will be operational in 2018. Architectural blueprints for both initiatives are in the process of being finalized. The Memorandum of Agreement with the University of Ottawa Faculty of Health Sciences is in the process of being signed.

Seniors' Quality Leap Initiative (SQLI)

SQLI is a collaborative of 14 leading long-term care and seniors' care organizations across North America who are committed to improving quality through benchmarking, common improvement initiatives, sharing and learning. SQLI members are currently focused on improving pain management and resident quality of life, and minimizing use of antipsychotics.

Engagement of Clinicians, Leadership & Staff

Clinicians, leaders and staff have been engaged throughout the development of the QIP and continue to be engaged in its implementation. QIP teams are comprised of inter-professional staff working at the point of care, with support from leaders and a staff member with quality improvement expertise. Performance data and improvement work are regularly shared during town halls, staff meetings for both registered and non-registered staff, Medical Advisory Committee, working committees, leadership and Board meetings. Performance data are also posted publicly on resident care units and updates provided in our newsletter *Between Us Briefly*.

During the initial development and subsequent updates of the QIP, representatives of the management team identify priorities for improvement, which are validated by staff, broader leadership team and Board of Directors. QIP teams with support from leadership, identify preliminary changes ideas, and set targets based on a review of internal and provincial data, benchmarks (if available), and an understanding of the potential for improvement (based on current practice and best practice).

The entire management team and Board of Directors reviews quality performance quarterly, including the status of key QI initiatives. Each QIP team presents an in-depth review of their work annually to the Board of Directors Quality of Life and Safety Committee.

Quality improvement goals are aligned with leaders' annual performance objectives, cascading from the CEO to supervisory staff. Quality improvement is the CEO's highest priority objective.

Population Health and Equity Considerations

Perley Rideau is a seniors' care organization with 450 long-term care beds; 230 beds dedicated to Veterans, and 220 beds available to members of the general community, including 34 convalescent care beds, 20 beds on a Sub-Acute for the Frail Elderly (SAFE) unit, and 20 beds on a Specialized Behavioural Support Unit (SBSU). Eligibility for and access to these beds is determined by the Long Term Care Homes Act (LTCHA), Veterans Affairs Canada (VAC) and Champlain LHIN Home and Community Care (HCC). As such, Perley Rideau admits all potential residents that meet the outlined criteria for admission to a long term care home, regardless of ethnicity, sexual orientation, income, etc. The Perley Rideau makes every effort to meet the needs of non-English speaking residents, which includes using pictorial communication tools during daily care delivery, having staff or volunteers translate during physician visits and care conferences, and accessing translation services through the consulate as required.

Perley Rideau leverages a number of data sources to better understand residents' needs and to inform clinical quality improvement initiatives. This includes its electronic health record (PointClickCare), internal incident reporting system, as well as quarterly CCRS e-report data. Priorities for improvement focus largely on clinical issues directly impacting quality of life for all residents, such as minimizing risk of falls, skin breakdowns, and effective pain management.

Perley Rideau's strategic direction is focused on evolution into a true seniors' village, where most of the needs of the elderly can be met within the community, including help at home, nutrition, safety, access to primary care, healthy living choices, companionship, opportunities for social activities and learning. Perley Rideau works collaboratively with local organizations to leverage its expertise and expand services across the continuum of care to better meet the needs of seniors in the community.

Access to the Right Level of Care - Addressing ALC

As highlighted above, Perley Rideau has established a Sub-Acute for the Frail Elderly Unit (SAFE collaborative) in partnership with The Ottawa Hospital (TOH) and the Champlain LHIN. This collaborative will improve the outcomes for hospitalized frail seniors by proactively addressing the conditions that contribute to ALC before the deconditioning associated with prolonged hospitalization is experienced. This will enable TOH to reduce its ALC population, thus allowing beds that are currently dedicated to ALC clients to be repatriated to acute care. This collaborative has the capacity to transform how major acute care hospitals treat older patients at risk of ALC and deconditioning (early assessment, collaboration with LTC).

Opioid Prescribing for the Treatment of Pain and Opioid Use Disorder

The Home has a comprehensive pain management program, which focuses on the minimization of pain, while maintaining optimal function and quality of life. The program uses a combination of pharmacological and non-pharmacological strategies including Recreation and Creative Arts, Occupational Therapy, Physical Therapy and Massage, and Spiritual Care in managing residents pain.

When considering pharmacological interventions for pain management, physicians follow the guidelines outlined in the WHO's Analgesic Ladder to the extent possible, starting treatment with non-opioids and progressing step-wise up the ladder as needed. When opioids are prescribed, they are started at the lowest possible dose, and residents are monitored frequently for negative side effects. In the event of a medical emergency caused by opioid administration, a Naloxone Administration protocol is in place through the Home's on-site Pharmacy provider.

To minimize the risk of misuse and abuse of opioids, the Home has implemented strict policies and procedures related to the prescription, storage, monitoring, auditing, destruction and disposal of these drugs. Notably, opioids are securely stored in a separate locked compartment of locked medication carts, with medication counts completed on every shift by registered staff from both the incoming and outgoing shift. Incidents of missing or unaccounted for controlled substances must be reported to the MOHTLC within one business day and investigated by the Home.

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.

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) 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 2018/19 QIP, please contact:

Melissa Norman
Manager, Quality Improvement and RAI
Email: mnorman@prvhc.com
Phone: 613-526-7170 x 2448

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)