



Canterbury Foundation

Quality Improvement Plan

Part I - Introduction to Canterbury Foundation

Canterbury Foundation is pleased to share our Quality Improvement Plan which describes some of our key priorities for quality improvement. Canterbury's vision "The Promise of Home" aligned with our mission to "enhance the lives of seniors" and its core values of respect, compassion, empowerment, ethical behaviour and honesty and integrity in all our actions have formed the basis for the major initiatives in the plan. This Quality Improvement Plan (QIP) is a documented set of quality and safety commitments to our stakeholders: residents, their families, staff, partners and community. The selection of these QIP priorities has been guided by Canterbury Foundation's seven strategic directions of which four are directly related to improving the quality of services to residents and their families and include

- Continuously improve the quality of services;
- Enhance accommodation;
- Optimize people resources;
- Optimize board governance.

These are further enhanced by the remaining strategic directions to: increase investment and support; strengthen partnerships; and expand community outreach and access, all of which increase our presence in the community and partnerships with stakeholders. Each department has also incorporated these strategic directions, as appropriate into its work plans.

Purpose: The purpose of the Quality Improvement Plan is to provide a formal ongoing process by which Canterbury Foundation and its stakeholders utilize objective measures to monitor and evaluate the quality of services provided to residents, both clinical and operational, so that we realize our vision, mission and values. The plan has been developed through the combined efforts of the board, senior management, staff, residents and their families. The path to Accreditation Primer with Accreditation Canada and the engagement of all stakeholders provided

the impetus to developing a Quality Improvement Plan. The accreditation surveyors along with management and staff identified areas where improvements were needed or where more information was required. The requirements for Qmentum accreditation have provided the extra impetus to develop an integrated Quality Improvement Plan which demonstrates Canterbury's commitment to continuous quality improvement (CQI) in care and services. All of the QIP indicators are aligned with best practices including resident satisfaction (person and family centred care), falls risk reduction, medication management processes, hand hygiene compliance, resident immunization and staff safety and turnover. Quantitative measures that focus on resident safety, the most important aspect of Canterbury's QIP, are utilized to measure quality and safety throughout the organization and are phased in throughout 2016. Additional qualitative and quantitative information will be collected through resident and family and staff experience surveys in 2016.

Part II - Essential Components of a Quality Improvement Plan

Quality improvement plans are the key to driving quality in an organization where health care and residential services are provided to seniors. A QIP provides the means to communicate to residents, families, staff and the public about the commitment of Canterbury leadership to quality improvement. It also gives leadership the opportunity to clearly communicate their promise to provide person and family centred high quality care in a safe environment.

It should be kept in mind that: "the foundation of the Qmentum Accreditation program is its national, evidence-based standards that outline how organizations can deliver quality and safe services. Qmentum is meant to be integrated into the daily quality improvement work of the resident organization. The new measurement for improvement standard fits within the outcome-oriented nature of the Qmentum and raises the bar for quality improvement by asking teams to focus on indicators, data collection and the formal steps in quality improvement."

In developing the QI Plan, several questions have been addressed as we proceed with Qmentum.

1. What are we trying to accomplish from a system perspective at Canterbury Foundation? Within the larger Alberta continuing care system?
2. Where are opportunities for improvement in our processes and what gaps exist?
3. How will we know a change is an improvement?
4. What can we do that would result in an improvement?

Canterbury Foundation's Commitment to Resident and Family Centred Care

Changes to the Qmentum program for 2016 have been introduced to support a stronger client (resident) and family-centred approach to care and services in health care and social services organizations across Canada. Canterbury has demonstrated its commitment to resident and family focused care and services through the development and participation in the Manor's Resident Council, the Court's Advisory Committee and family meetings in the Lane. These commitments will be strengthened in the following months in various areas including improvements to the resident survey and greater involvement of residents and families in Qmentum initiatives such as participation on some of the teams and committees. With input from residents and families and in partnership with residents and families, these are some of the ways that resident and family centred care can make a difference:

- Increased resident, family and staff satisfaction;
- Improved staff morale;
- Improvements in meeting resident needs;
- Increased confidence and improved public and stakeholder (including funder and donor) perceptions and opinions of Canterbury Foundation leading to more support and resources for our programs and services;
- Drives the Quality Improvement initiative;
- Reduced frustration;
- Improved resident experience;
- Improved outcomes;
- Increased transparency; and
- Improved quality of care.

Quality Improvement Committee

Fundamental to guiding and supporting quality improvement efforts at Canterbury is the establishment of a Quality Improvement Committee (QIC). The committee includes representation from senior management, board members, staff, residents and families. This committee has many critical responsibilities with respect to encouraging a culture of quality improvement such as:

- Fostering a culture where quality improvement is a priority by ensuring policies are developed to sustain quality improvement initiatives regardless of staff changes;
- Setting expectations around safety and quality while recognizing the rights and choices of residents;
- Ensuring staff accountability; and
- Creating an environment where staff is comfortable identifying and reporting quality and safety concerns as well as opportunities for improvement.

This committee plays an integral role in the steps toward Qmentum Accreditation in 2017 assuming many of the responsibilities of the previous Accreditation Committee.

Teamwork

Teamwork is a critical component of quality improvement initiatives and was a major factor in the success of Canterbury Foundation through the Accreditation Primer process. Interdisciplinary teams will be required for the Qmentum initiatives particularly for the work that needs to be done with respect to the Required Organizational Practices for each of the five standard sets:

- Residential Homes for Seniors;
- Medication Management for Community Based Organizations;
- Infection Prevention Control for Community Based Organizations;
- Leadership; and
- Governance.

The members of these teams assume responsibility for the design and evaluation of the quality improvement initiative. Key considerations in forming teams include determining what expertise is required to provide relevant input into each initiative and including members who influence those specific areas that are prioritized for quality improvement. Family members and residents may also be team members with safeguards in place to preserve confidentiality of information that identifies individuals.

Part III - Resident and Staff Safety Goals, Measures and Targets

Safety is first and foremost for all persons that are part of Canterbury Foundation – residents, families, visitors and staff. While Canterbury has been proactive in providing residents and their families with written and verbal information in promoting safety, there are areas that have been identified through accreditation for quality improvement including the need for proactive strategies to reduce falls, more comprehensive medication management policies and procedures, and formal evaluation of infection prevention and control activities such as immunization and hand hygiene compliance. The Accreditation survey also recommended that a policy and process be implemented for reporting near misses with a plan to educate staff on the importance of identifying and documenting near misses. A near miss is a resident safety incident that did not reach the resident. Staff also need to receive education and training on occupational health and safety regulations in addition to knowing organizational policies on workplace safety. Compliance with accommodation standards that are mandated by provincial regulations and regular formal risk assessment processes also contribute to a safer environment for all. With this in mind, the following goals were prioritized with change ideas for consideration:

Goal 1: Our QI goal is to reduce the number of total number falls by 50% from the number of falls experienced by residents in the month ending December 31, 2015 compared to the number of falls in the month ending December 31, 2016, by living option. (Falls in the month of December 2015 will be the baseline). A Falls Prevention Strategy is being implemented in early 2016.

Goal 1(a): As part of our Falls Prevention Strategy, our QI goal is to complete a falls risk assessment on 100% of residents on taking up residency at Canterbury or on readmission to Canterbury from other levels of care within 72 hours. This measurement will begin with the implementation of the Fall Prevention Strategy in early 2016 and will be reviewed monthly and quarterly to the end of December 31, 2016.

Goal 2: Our QI goal is to reduce the number of medication safety incidents from 17/month for the month of December 2015 to 0 in the month of December 2016.

Goal 2 (a): Our QI goal is to carry out medication reconciliation on 100% of Canterbury residents within 72 hours of admission to Canterbury as a resident or on readmission from another level of care such as acute care by December 31, 2016.

Goal 3: Beginning July 1, 2016, our QI goals are to reduce the number of residents on psychotropic medications without appropriate diagnosis by the end of 2016. A baseline will be established by the end of the second quarter to enable monitoring and establishing a target. This is a key goal in long term care and we anticipate that Accreditation Canada may require increased surveillance with respect to psychotropic drugs in supportive living environments and in standards for residential homes for seniors.

Goal 4: Our QI goal is to increase the percentage of residents with a vaccination against both influenza and pneumococcal disease documented in their medical record from approximately 80 % to 90% by December 31, 2016.

Goal 5: Our QI is to increase the level of hand hygiene compliance of staff from the baseline % to 75% by December 31, 2016. A hand hygiene audit will take place in early 2016 to establish a baseline.

Goal 6: Our QI goal for staff safety is to decrease the number of lost time WCB claims by 25% by December 31, 2016, compared to the number of lost time claims that occurred in 2015.

Goal 7: Our QI goal is to provide 90% of our employees at least one in-service training session on the principles of resident (person) and family centred care (PFCC) by December 31, 2016.

Goal 8: Our QI goal is to increase the % of residents that are satisfied with meals and the overall dining experience at Canterbury including taste, healthy choices, food temperature, and presentation.

Goal 9: Our QI goal is to decrease voluntary staff turnover by 25% for 2016 compared to 2015 as calculated for the year ending December 31, 2016.

References

1. Accreditation Canada Qmentum Program, Standards and Required Organizational Practices for Leadership and Governance.
2. Health Quality Ontario at <http://www.hqontario.ca/Quality-Improvement>
3. Accreditation Canada, Measurement for Improvement, 2016.
4. Canadian Foundation for Healthcare Improvement at <http://www.cfhi-fcass.ca/AboutUs.aspx>
5. Agency for Healthcare Research and Quality. The Department of Defense and the Agency for Healthcare Research and Quality developed the Team STEPPS program to optimize performance among teams of healthcare professionals and improve collaboration and communication. The Long-Term Care version addresses issues specific to nursing homes: <http://www.ahrq.gov/professionals/education/curriculum-tools/teamstepps/ltc/index.html>.
6. Centers for Medicare and Medicaid Services at <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/qapitools.html>. See A Process Tool Framework, in particular, QAPI at a glance.

7. Canadian Patient Safety Institute at <http://www.patientsafetyinstitute.ca/en/Pages/default.aspx>, and programs such as Safer Healthcare Now which suggests a target of 40% for falls reduction. Other falls targets are based on a falls rate which is a different mathematical calculation.
8. Institute of Person and Family Centred Care at <http://www.ipfcc.org/>
9. Let's Make Healthy Change Happen. Quality Improvement Plan (QIP) Guidance Document for Ontario's Health Care Organizations, Released November 2014 . Government of Ontario.