

Let's Make Healthy
Change Happen.



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



3/31/2017

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

At Dom Lipa, we are committed to continuously improving the quality and safety of the care and services we deliver to our residents. Our Quality Improvement Plan (QIP) is an important element in supporting the 2016-2019 Mississauga Halton Integrated Health Service Plan "Partnering for a Healthy Community".

Our chosen QIP indicators are aligned with our Long Term Care Services Accountability Agreement (L-SAA), and reflect Dom Lipa's responsibility to identify areas and processes in which we have the potential to achieve a substantial improvement in our work and care practices.

For the 2017-2018 QIP, Dom Lipa will focus our time and energy on the following quality indicators:

- * improve our focus on minimizing unnecessary and potentially avoidable emergency department visits.
- * improve our focus on minimizing inappropriate use of psychotropic drugs in Long Term Care.
- * Improve our focus on minimizing falls for our residents.
- * Improve our focus on the resident experience.

QI Achievements From the Past Year

Dom Lipa's greatest quality improvement achievement in the past year was continuing our focus on reducing the use of anti-psychotic medications in residents without a diagnosis of psychosis. The issue is that for some residents, anti-psychotic medications improve quality of life and reduce suffering. But, for some residents without a true diagnosis these drugs may bring more risks than benefits. Through collaboration with our physicians, pharmacist, front line staff, families and residents we were able to surpass our projected 2016/17 target of 27.30 to reach our current performance of 23.19. Addressing the issue for new admissions has shown significant success in helping to minimize the risks associated with using anti-psychotics in the elderly.

Population Health

Dom Lipa is an ethno-specific Long Term Care home that caters to the Slovenian resident.

We are fortunate to be able to communicate to our residents in their native Slovene language, both written and orally.

We have found that communicating in Slovene greatly benefits our residents living with dementia. We have experienced reduced responsive behaviours and aggressive episodes, which in turn reduces injuries to our residents and staff and results in creating a safer workplace and Home for all.

We also understand that speaking any second language may delay dementia. The mechanism of which is not known but research has suggested that:

"Speaking more than one language is thought to lead to better development of the areas of the brain that handle executive functions and attention tasks, which may help protect from the onset of dementia." said study author Suvarna Alladi, DM, with Nizam's Institute of Medical Sciences in Hyderabad, India.

Keeping our Slovene language and heritage at the forefront is essential to address the needs of this unique population.

Equity

Work will begin on incorporating basic Slovene language modules into orientation and training materials in order to provide staff with a resource that will enhance their communications skills with residents.

Integration and Continuity of Care

Dom Lipa has incorporated the Ministry of Health and Long Term Care priorities of integration and continuity, by designing improvement strategies which demonstrate Dom Lipa's commitment to work with system partners to achieve improved quality, both within and beyond our home walls. For example, partnering with MHLHIN NPStat program has greatly supported our success in reducing unnecessary emergency transfers to hospital over the past two years.

Access to the Right Level of Care - Addressing ALC Issues

Our Home is small, but our hearts are big and when the Home begins the redevelopment of our "C" beds, it will have an opportunity to discuss bariatric clients in the mix which will help address the ALC issues with the sector.

Engagement of Clinicians, Leadership & Staff

Dom Lipa is committed to quality improvement at all levels within the organization. Our governance structure ensures that discussions about quality improvement occur with representation from all our clinicians and administration. Our Continuous Quality Improvement Committee (CQI) enables broad consultation and engagement from across the organization for input into a coordinated quality agenda. These discussions are reported to our Board of Directors, and Professional Advisory Committee (PAC), all of which play important roles in representing our clinical program in matters related to quality.

Resident, Patient, Client Engagement

The resident's voice is a critical component of an effective health system design. For care to be truly resident-centered, resident's, families, caregivers and communities need the opportunity to provide meaningful input into the way that care and services are delivered in our Home. Through our annual Resident and Family satisfaction survey and monthly resident and family council meetings, we aim to provide a valuable forum to hear from all of our stakeholders.

Staff Safety & Workplace Violence

Our focus is to provide a safe work environment for all our staff, volunteers and residents. Our Behavioural Support Staff (BSO) funded by the MHLHIN, continue to train and support direct care staff to identify and respond to residents with dementia who have the potential to cause harm to staff, volunteers and residents. All our staff are provided with training upon orientation and annually on responsive behaviours and the Joint Health & Safety Committee tracks and discusses incidents as an ongoing tool to aid in the development of strategies to prevent and or reduce workplace violence throughout the Home.

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

Administrator /Executive Director

Quality Committee Chair or delegate

CEO/Executive Director/Admin. Lead _____ (signature)

Other leadership as appropriate _____ (signature)