



Belvedere Heights
Community Support Services Residences Long Term Care

Quality Improvement Plan 2015

DRAFT

Overview

Quality Improvement for the home is a continuous cycle of change that enhances the life of the person served. Over the last two years there has been a major change in the demographics of the population in the home. Individuals are more acute in their disease progression and as a result length of stay has decreased. From January of 2013 to December of 2014 the change has resulted in 74 % turnover in the homes resident population. This has resulted in new cases continuously with various conditions, some evident on admission some not. This constant change impacts statistical data posted annually on the Health Quality and Ministry websites. Trends are difficult to predict and manage. While these pose significant concerns in meeting targets, provincial averages or guidelines the processes for prevention and improved techniques in care can be charted and found as the multitude of new clients flows through the home. There is no longer stability like years past where resident remained for 3-5 years now the average stay varies from 3 months to 2 years. The ever changing client base places new challenge on Long Term Care homes in costs of operations as well as trying to chart a course of improvement to meet provincial targets. Information provided on admission can be lacking and transfers from other sites can bring with it a situation where previous care needs were not adequately met impacting statistics. Resources in Long Term Care and changes to the High Intensity Needs programs have increased costs of care needs for homes. Limits to funding have not met the ongoing needs of homes to meet the more complex care base of residents now becoming the predominant clients requiring care. Residents are on a cycle, admission, improvements, disease progression, decline, and then end of life. Managing improvement with a moving target is a challenge.

For Long Term Care Homes the LTC Homes Act 2007 is very clear that the home is to respect the wishes of the resident / substitute decision maker in the provision of care. This means taking and allowing risks, transferring to hospital when requested even though it may not be required and refusing treatment affecting care. Although staff may provide advice and recommendations are provided it is ultimately the resident's home and they can decide what they want. Physicians are only on site one day a week which in some cases result in more transfers to hospital due to lack of expertise.

- Every Resident has the right to have his or her participation in decision-making respected.
- Every Resident has the right to, participate fully in the development, implementation, review and revision of his or her plan of care, give or refuse consent to any treatment, care or services for which his or her consent is required by law and to be informed of the consequences of giving or refusing consent, participate fully in making any decision concerning any aspect of his or her care, including any decision concerning his or her admission, discharge or transfer to or from a long-term care home or a secure unit and to obtain an independent opinion with regard to any of those matters, and have his or her personal health information within the meaning of the Personal Health Information Protection Act, 2004 kept confidential in accordance with that Act, and to have access to his or her records of personal health information, including his or her plan of care, in accordance with that Act.
- Every Resident has the right to have his or her lifestyle and choices respected.

This trend has resulted in a change of direction for the home in striving for quality improvement. Our focus will be on better methods of care and processes that are flexible to meet the challenges described above. Cost effective care and services , accepting that resident input and decision making may not always meet the objectives of the system, interdisciplinary approaches to solutions , research into other sites methods, training and education to improve skill level of staff, monitoring and managing an effective restorative care program, funding methods to support specialized needs not funded.

The home will continue to focus on where it can make the greatest improvements in care and service delivery to meet the health and wellness needs of the person served.

Our focus will be on prevention and minimizing risks in processes subject to resident rights. Incident and infection control management to ensure safety for all in home environment including staff and visitors. From the first step in the home to the last every element of a process will be reviewed ongoing in order to improve the persons served experience.

Executive Summary

Belvedere Heights Mission is a commitment to ensure excellence in care and community service. To guarantee this focus Belvedere is an accredited Long Term Care Facility. CARF (Commission on Accreditation of Rehabilitation Facilities) addresses all aspects of the operation including the requirement to continually improve resident centred programs.

In 2013 the Board of Management updated their four year strategic plan outlining six main priorities to ensure operational efficiency and effectiveness in all process. These priorities align with the accreditation process and quality improvement planning in the home.

- Excellence in Care
- Human Resources Planning
- Ongoing Performance Management
- Effective Financial Management
- Meeting Legislative Requirements
- Developing a 10 Year Plan

Continuous improvement is central to the homes accreditation program. This aligns with other initiatives and legislative requirements that the home is mandated to meet.



Carf Board Strategic Plan :

Belvedere Heights Plan

Belvedere Heights is committed to excellence in care and community services in which we grow together with our partners (associates /colleagues) in a continuum of care valuing the principles of compassion, dignity, integrity, accountability, continuous improvement and teamwork.

In determining and developing the Quality Improvement Plan for 2014, the following documents were incorporated:

- Belvedere Heights Board of Management Strategic Directions (2014 -17)
- Board Goals and Objectives 2014
- Quality Improvement Plan for 2014

Belvedere Heights continually strives to improve the care, programs and services it provides to residents, families and the community. Objectives and areas for improvement have been categorized under the following headings:

- Safety - Improve Resident and Staff Safety
- Resident/Client Experience and Satisfaction - Increase Staff Knowledge of Provincial Standards for QI Measurements.
- Staff Experience - Engage Staff in Communication Planning
- Operational Business - Improve Time Management in Environmental Services

All of the above areas will be designed to focus on the concept of person centered care. Through identification of barriers a plan to overcome these will be put into place. The home will review the entire experience for client and service providers. Continuous improvement will be prioritized and balanced to ensure a manageable approach within each area of focus in order to enhance the existing quality improvement program taking into consideration the limited resource base, staffing and budget of the home. The improvement cycle plan/do/study/act forms the bases of the process.

The Quality Improvement Plan aligns with the Home's Strategic Directions and Business Plan for 2014-17 by way of adapting the same four categories of safety, resident/client experience and satisfaction, staff experience and operational activities and by developing and actively engaging in quality improvement targets and initiatives. These categories incorporate the major achievements Belvedere Heights is seeking to attain over the next year. The Quality Improvement Program performance key indicators have been expanded to capture relevant data to determine plans and processes to be in compliance with Ministry of Health and other relevant Legislation, and to provide increased satisfaction for our stakeholders.

Achieving our quality improvement goals and objectives will enhance our ability to provide improved quality of care and services for our residents and clients. The management team meets quarterly to discuss quality improvement audits and programs. There is a monthly schedule of reports to the Board on all key performance indicators. Community Support Services is part of the overall program with defined indicators and plans for improvement.

The home has a number of internal committees in addition to those mentioned above which are part of the quality program: Engaging internal and external clients ensure effective communication and outcomes for the person served.

Challenges, Risks and Mitigation Strategies

CHALLENGES	RISKS	MITIGATION STRATEGIES
Meeting the indicator target	Falling short of the target	Comprehensive plan with dedicated leadership
Engage all levels of staff	Lack of buy in for change	Education, mentorship encouragement
Unable to complete work tasks	Emergency Situations i.e. outbreak, pandemic	Revise plans; assign extra duties when possible
Demonstrating improvement within a set period of time	Targets not hit within timeframe	Performance excellence
No Funding to Meet Objectives	No funds for capital and equipment replacement or legislative changes.	Apply for Grants and submit business case to LHIN for Funds.
Changing Technology	Mandates without human or financial resources.	Extend time frame for implementation and engage stakeholders for support.
Limited Funding for Operational Needs	Accommodation envelop is being stretched and funding to support nursing envelop is shrinking.	Engage Stakeholders and vendors in cost containment.
Union Settlements	Arbitrators are not limited in outcomes of settlements.	Engage expertise to assist with outcomes.

Information Management

Belvedere maintains a long and short range plan for technology improvements. One of the main constraints is cost both capital, equipment, ongoing training and system management. These cost escalate but funding to support these needs and demands has not kept pace with the requirements.

The home dedicates 80% of its funding to direct care for the individuals served. Technology advances will be limited to mandated and those that demonstrate cost savings and efficiencies in services that can be support for the future. The plan requires that technology benefit the person served and assist staff to provide improvements to care.

For 2015/16 the home will continue to implement technology that provides improved reporting on each resident in order to enhance the effectiveness of care delivery.

Engagement of Clinicians and Leadership

The home is pleased to have three physicians, a dietician, physiotherapy provider and others who are engaged in the care process in the processes related to care planning.

The home meets quarterly with its' medical director, pharmacy, infection control and other health professionals to discuss the process in all these areas and determine what improvements can be implemented. This process is effective and implementation of change is ongoing within realistic time frames. There is only 4 managers in long term care and one in community support services. The home utilizes input from registered staff, unregulated staff and in all departments to form part of the interdisciplinary teams that meet for various committees to seek input relative to ongoing change in the home.

Patient/Resident/Client Engagement

The person served is consulted at every stage of care. Surveys and feedback forms are in continuous use to seek feedback on resident priorities and ongoing quality improvement changes.

Accountability Sign Off

The Board of Management of Belvedere Heights has reviewed and approved the Home's Quality Improvement Plan for 2015.

Board of Management

Date:

Board of Management

Date: