

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

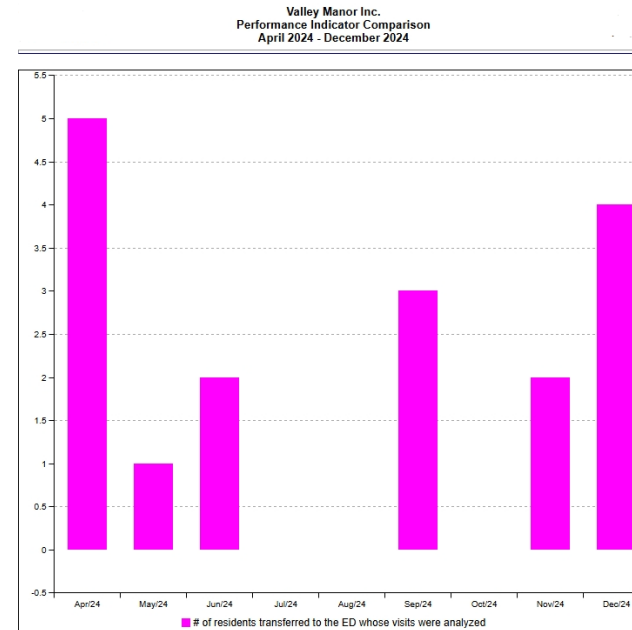
March 28, 2025



OVERVIEW

The 2025/26 Quality Improvement Initiatives that the home will be focusing on embrace the home's Strategic Plan 2022-2027 and build upon the foundational values of Integrity, Transparency, Leadership, Workplace Satisfaction, and Compassion. Valley Manor's Quality Improvement Initiatives are developed with the voice of the residents and their family members/POAs/SDMs, the Continuous Quality Improvement Committee, the Board of Directors, the staff, and other key stakeholders in an effort to attain, sustain, or exceed provincial benchmarks for long-term care and to improve the experience of the resident. Valley Manor has chosen to continue to focus on Access and Flow, acknowledging the rapidly increasing complexity, acuity, and unpredictability of our residents health. At present, the home's performance is 16.8% which is below the provincial average of 21.7% and the Champlain LHIN at 22.0 %. However, this is a 10.56% improvement from last year which was 27.36 %. Active collaboration took place with the Medical Director, CEO, Director of Care, and Continuous Quality Improvement Co-ordinator in an effort to decrease the number of avoidable ED visits, and this was very successful in contributing to the decrease in potentially avoidable ED visits. Taking the time with residents and SDMs at resident care conferences to improve their awareness on treatments that can be provided here in the home was also a successful change idea. The Nursing Coordinator/delegate held open discussions with the residents and their SDMs in an effort to educate them on interventions that can be provided to them in their home. It was also another opportunity for residents to voice their choice in decision-making. 59/71 or 83% of residents/SDMs who had a scheduled Multidisciplinary Care Conference (MDCC) during Q1-Q3 were provided with this information. Unfortunately, due to changes in Health Human

Resources (HHR) we were not able to attain 100% in that time frame, however this education will continue to be provided to the residents and their SDMs at care conferences moving forward. The implementation of the Resident and Family Satisfaction Survey was late this year due to changes in roles for key staff members who are involved in the development and implementation of the survey. With feedback on the survey's development from members of the Residents' Council and Family Council, the Resident and Family Satisfaction Survey was implemented with an online format on November 12, 2024. 5 SDMs did not have email and therefore were sent the survey via surface mail. The survey ran until December 9, 2024, however, this was extended to December 17, 2024, due to the mail strike. Additional paper copies were also available at the main office for those who wanted to complete a paper copy, and an iPad was also available for those who wished to complete an electronic survey with their family member. 50% (45/90 residents) of the responses were received electronically with 3 received on paper. This was an improvement from 48% of the resident population last year. Action plans will be developed for areas that fell short of 75% and will be provided to both the Family and Residents' Council. Valley Manor will continue to focus on the home's Vision Statement, "Cultivating a diverse home where all are welcome and respected" by implementing change ideas that support equity, diversity, inclusion and anti-racism. In addition, Valley Manor will be working on change ideas to improve our current performance for the percentage of LTC resident's who had a fall in the 30 days leading up to their RAI/MDS assessments. By implementing effective fall prevention strategies, we can enhance both the physical and emotional well-being of the residents leading to a better overall living experience for them.



ACCESS AND FLOW

Valley Manor recognizes the increasing acuity and complexity mixed with the unpredictability of our resident population. Residents are now moving into Valley Manor later in their life, often with complex chronic illnesses and multiple co-morbidities which all need to be well-managed for optimal outcomes. Valley Manor's 2025/26 QIP will focus on implementing change ideas to further improve awareness of treatment options available within Valley Manor to help meet the goals of care for each of the residents. Valley Manor will also strive to embrace the individual physical, emotional, and spiritual needs and wishes of the residents that call Valley Manor "home". To help residents remain in their home while receiving the best possible care, we offer SDMs access to technology that enables video appointments with specialists, often located hours away. These appointments are typically conducted in the comfort of their

home, or, if that's not possible, at our local hospital clinic. This service reduces the need for residents to travel long distances to consult with specialists. Valley Manor's Behavioural Support Ontario (BSO) team continues to partner with the Royal Ottawa Mental Health Centre, and this has led to improved quality of care and quality of life for residents with, or at risk of, responsive behaviours associated with dementia, complex mental health, substance use disorders and neurological conditions. The home's BSO PSW has been working closely with a BSO RPN, and a Behavioural Therapist. The BSO PSW supports the residents, families, and staff in identifying and modifying environmental factors related to responsive behaviours, as well as providing nonpharmacological interventions for care and integration of the resident into their new home. The BSO RPN conducts holistic assessments to rule out contributing factors of responsive behaviours and also provides support directly to the BSO PSW. The Behavioural Therapist participates in collaborative behavioural discussions, BSO process evaluation/support/assistance in the home, behavioural education sessions, and behavioural assessments and consultations. Together they are embracing and demonstrating the BSO Core Competencies. Person and Family-Centered Care begins when the resident moves into our home. The BSO Team has created a pamphlet that will be included in the home's "Welcome Package". The pamphlet, "Dementia and Responsive Behaviours - Understanding Behavioural and Psychological Symptoms of Dementia" provides residents and their family members with an introduction to the Behavioural Support Services offered within the home. The pamphlet explains the role of the BSO PSW, and it provides a short description of the collaboration between the Valley Manor's BSO Team and the Geriatric Mental Health (GMH) Outreach Program which consists of BSO providers - GMH RN, BSO RPN, and

the Behavioural Therapist. Other information included in the pamphlet are common responsive behaviours, behaviours that don't respond to medication, and best practice recommendations for what the family member can do for the resident. The pamphlet also defines, "responsive behaviour", and dementia. The BSO Team is also utilizing the BSO Provincial Toolkit, and the "My Personhood Summary" is now being provided in the "Welcome Package" as well. The resident and/or their family member completes the summary allowing care partners the privilege of seeing the resident through their eyes. It is shared with permission of the resident or their POA-PC with the CEO, Managers, leads of programs, the BSO Team, and the nursing staff. It is read out loud at the resident's initial Multidisciplinary Care Conference, and is used in the development of the resident's individualized plan of care.





EQUITY AND INDIGENOUS HEALTH

Valley Manor's mission statement, "Empowering every person to provide compassionate, resident-centered care in a diverse family environment," highlights the significance of honoring residents' values, ensuring their voices are heard, and respecting their choices. When a resident moves into Valley Manor the resident and/or their SDM is provided with a "My Personhood" summary form. This summary is a great way to personalize care by giving staff deeper insights into each resident's background, preferences, and needs. By involving the resident and/or their SDM, it ensures that the care team has a comprehensive understanding of the person as an individual, not just a resident. This approach can help staff connect with residents on a more meaningful level, making the plan of care more tailored and respectful of the resident's values. Our activities department offers large and small group programs based

on the interests and culture of our residents and these can include music programs, religious programs, and/or 1:1 individualized therapeutic activation programs to name a few. Valley Manor is home to many residents of Polish and Irish descent and therefore celebrating "Polish Day" and "St. Patrick's Day" is very meaningful to these residents. When possible, community members join in celebrating these events often with music and special treats. We have welcomed several residents from urban areas who wished to relocate to Valley Manor related to the rich Polish heritage and culture within the community. The recreation department continues to host the program, "Armchair Travel" monthly. The program includes a resident passport that is stamped at the beginning of the program, a video of a country that may be familiar to them or not, fun facts about the country, and the resident is served a light snack reflecting the country that they "toured". This program offers a different cultural experience for our residents within the walls of Valley Manor. We have a diverse work force within Valley Manor which supports the person-centered care for our residents. Cultural dietary preferences are considered when menu planning to ensure the residents enjoy their favorite foods and this is reviewed and approved by the Residents' Council. The home's Recreation Department also offers multi-faith spiritual programs both in large and small group settings and with individual programs. Spiritual care is also offered to the families at end-of-life and are discussed with SDMs and often arranged by either recreation staff or nursing staff. The CEO, DOC, and Board Chair open all meetings with a Land Acknowledgement recognizing the ancestral homelands of the Algonquin and Anishinaabe people. The CEO along with other members of the Circle of Health participate on the IDEA (INCLUSION, DIVERSITY, EQUITY & ACCESS) committee. It aligns well with our strategic plan model. The CEO continues to

provide French Language reports and Indigenous reports to the Ministry. The CEO who is also an active member on the Ottawa Valley OHT is pleased to report that the Ottawa Valley Ontario Health Team and the Health Services Department of the Algonquins of Pikwàkanagàn First Nation will partner in an initiative aimed at enhancing the health status of Indigenous Peoples across our region.



PATIENT/CLIENT/RESIDENT EXPERIENCE

Valley Manor continues to collaborate with residents and family members in the development of the home's Quality Improvement Initiatives. Residents' Council meetings and Family Council meetings are held regularly, and meaningful input is obtained through these meetings. The home has implemented the Ontario Association of Residents' Councils (OARC) meeting minutes template to ensure that the home is following the FLTCA, 2021. Residents' Council concerns are well documented with actions taken to resolve concerns and whether the concern has been resolved. The Residents' Bill of Rights is reviewed with examples presented and residents are provided with an opportunity to express any concerns. Home area updates continue to be provided to the Residents' Council that include nursing and personal care, restorative care, IPAC, administration, religious and spiritual care,

environmental services, and volunteer's, recreation and social activities, food and support services, and other medical and staffing updates. Multidisciplinary Care Conferences are also an opportunity for residents and their SDMs to share their experiences and extra time is allowed for residents and family members to express any concerns and wishes for improvements in the services provided. The home tracks concerns voiced, and concerns resolved from residents and their SDMs at the "Move In" and annual Multidisciplinary Care Conferences. This information is then shared by the Nursing Coordinator, Manager of Support Services, and Manager of Recreation & Volunteers at the Continuous Quality Improvement Committee meetings that are held every 2 months. Valley Manor staff receive education on the Residents' Bill of Rights at the annual Step Ahead education. The Recreation Department is excited to start a new program called "Fit Minds" which is a program that builds cognitive resilience and creates a healthy brain fitness routine. This is being performed in small groups with a trained recreational staff member who performs engaging and challenging brain activities. At Valley Manor we aim to make many of our activities, "home-style." From planting an annual vegetable garden, cutting strawberries and beans in the summertime, to our monthly baking programs, we maintain many of the residents' former abilities and interests in the activities that we program. The Recreation Department has developed and implemented a new group that gathers every Monday morning, called "Handy Helpers." At this program, the activity staff demonstrate how the Laundry Department would like the towels folded, and the residents follow the lead of the Activity Staff. The Laundry Department is very grateful for the help that they receive from our residents, and the residents feel valued and accomplished for the work that they completed.

PROVIDER EXPERIENCE

Given the challenges with an aging workforce, heavy workload, and staff leaving the health care setting, Valley Manor continues to diligently work to grow our leaders and inter-disciplinary teams. Our Human Resource (HR) Manager is passionate about attracting, developing and retaining the best talent within a safe and healthy environment that encourages wellness, diversity and innovation. In addition to posting job opportunities in-house, our HR Manager also posts on the Valley Manor website, in local newspapers, with Colleges, Rural Outreach, on Linked In, and on Indeed. The home has also engaged with staffing agencies to fill gaps in our schedules for back-up staff when the need arises. Valley Manor currently uses these agencies for Registered Staff and PSW's. Valley Manor negotiated with ONA in October 2024 and the contract was ratified. Staff appreciation celebrations continue for all staff whereby the staff are honoured and recognized for all that they do for the residents at these recognition events. Recognition of the Valley Manor workforce has always been a priority, and more emphasis is being put into ensuring that the team is healthy and engaged leading to improved job satisfaction. A small team of Valley Manor staff have begun a program entitled, "Workplace Mental Health in LTC". This program is provided by the Ontario Centres for Learning, Research and Innovation in Long-Term Care. This 6-month program is aimed at supporting LTC homes across Ontario to adopt the National Standard of Canada for Psychological Health and Safety in the Workplace. It also supports LTC leaders in building an organizational culture that promotes and protects the mental health of all team members, and improves workforce productivity, recruitment and retention. The Valley Manor aims to foster a happier, healthier, more resilient workforce who will ultimately be more capable of providing quality care for the residents.

SAFETY

Members of the Continuous Quality Improvement Committee, in collaboration with the Long-Term Care Pharmacist, complete the Medication Safety Self-Assessment (MSSA) developed by ISMP annually to evaluate the safety of our medication system, identify vulnerabilities and opportunities for improvement, increase awareness of safe medication system characteristics, and monitor progress over time. The MSSA was completed in November 2024, with an improvement in scoring from 91% in 2023 to 93% in 2024. The Long-Term Care Pharmacist is a member of the Continuous Quality Improvement Committee and provides reports at the meetings that are held every 2 months. The Long-Term Care Pharmacist presents reports on drug utilization, trends, and drug utilization patterns in the home including the use of any drug or combination of drugs, including psychotropic drugs, that could potentially place residents at risk. The Long-Term Care Pharmacist also reports on all medication incidents and adverse drug reactions, and all instances of the restraining of residents by the administration of a drug when immediate action is necessary to prevent serious bodily harm to a resident or to others pursuant to the common law duty. The Long-Term Care Pharmacist, in collaboration with other members of the Continuous Quality Improvement Committee, identifies changes to improve the medication system in accordance with evidence-based practices and, if there are none, in accordance with prevailing practices. Valley Manor held a mock triennial full evacuation in October 2024. The local Fire Chief was present, and the full evacuation was completed in 24:28 minutes which is an improvement from the previous full evacuation drill of 32 minutes. The Valley Manor website displays the Emergency Plan Program Manual available for residents, families, and other key stakeholders to review.



PALLIATIVE CARE

Many of the residents who call Valley Manor "home" suffer with life limiting illnesses. Illnesses that are life limiting include chronic lung, heart, kidney disease, and neurocognitive disorders at various stages. Valley Manor believes in providing the right care at the right time and in the right place. We embrace our palliative care and end-of-life program. We have partnered with the Regional Palliative Consultation Team from Bruyere Health who provide consultation on pain and symptom management and end-of-life care. They have been an invaluable resource to residents who have complex medical needs and their SDMs and offer a palliative approach. The Regional Palliative Consultation Team consists of a partnership between Bruyère Health and Ontario Health at Home, supporting health care professionals caring for palliative patients in the community. This service is available to the home 24 hours/day, 7

days a week. A suggested order set of end-of-life medications commonly used with rationale was developed by the Palliative Care Program Lead in consultation with our Medical Director and the Long-Term Care Pharmacist to assist all nurses in advocating for orders for end-of-life care. At the time of the resident's "move-in" and during the annual multidisciplinary care conference, we consistently provide the resident and their SDM with information using the palliative and end-of-life clinical support tools, as well as the palliative performance scale. This approach helps facilitate discussions about end-of-life care and the resident's position on the care continuum. SDMs and residents are encouraged to ask questions about palliative care and end-of-life wishes and goals of care. SDMs and residents are also offered available webinars or education at these times. Palliative care education is also provided to all staff at our "Step Ahead" education day with a presentation from a member of the Regional Palliative Consultation Team. Several of our registered staff also attended an education day in Ottawa in October 2024 to better understand palliative care and treatments.



POPULATION HEALTH MANAGEMENT

The CEO and other members of the Leadership Team continue to be active members of the Ottawa Valley Ontario Health Team (OVOHT). They are active members who are forming system partnerships within the Ottawa Valley Ontario Health Team to enable countless opportunities to improve healthcare in Barry's Bay and the surrounding area. The OVOHT is made up of more than 50 local health professionals, health care providers, organizations, and community members who are working together to improve our health system and connect patients to the services they need in a more consistent and timely way. The CEO and the Manager of HR & Finance continue to participate in the Capital Development Advisory Group for Advantage Ontario which is an advocacy group for not-for-profit long term care homes. Most recently advocating for increased funding for rural, not-for-profit homes that experience

decreased community fundraising due to the small community population such as the area in which Valley Manor is located. The CEO, and the Manager of HR & Finance actively participate in many of the Ottawa Valley Ontario Health Team tables which include Communications, Finance and Stability, Governance, Health & Human Resources. Valley Manor continues to ensure that long term care is well represented at the OVOHT table. The Infection Control Practitioner at the Valley Manor is diligently working to promote health, prevent disease, and help our residents and their visitors to live well. The Infection Control Practitioner provides education and training to all staff and essential caregivers about physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE to ensure the safety of residents, staff, and visitors. The Infection Control Practitioner also attends Residents' Council meetings and staff meetings monthly to provide IPAC updates and to answer any questions residents or staff have. The home has also partnered with the Regional Palliative Consultation Team in an effort to help our Palliative Care Team ensure that our residents with a life-limiting illness live well day to day. Our Behavioural Support Ontario (BSO) team continues to foster the partnership with the Royal Ottawa Mental Health Centre leading to improved quality of care and quality of life for residents with, or at risk of, responsive behaviours associated with dementia, complex mental health, substance use disorders and neurological conditions. The home's BSO PSW has been working closely with the BSO RPN, and the Behavioural Therapist. Together they are embracing and demonstrating the BSO Core Competencies.

CONTACT INFORMATION/DESIGNATED LEAD

Lynn Strack Continuous Quality Improvement Lead
613-756-2643 ext. 232

Trisha DesLaurier Valley Manor CEO
613-756-2643 Ext. 224

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 on
March 21, 2025

Gwen Brown, Board Chair / Licensee or delegate

Trisha DesLaurier, Administrator /Executive Director

Chantel Brown, Quality Committee Chair or delegate

Lynn Strack, Other leadership as appropriate
