

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

November 6, 2023



OVERVIEW

Clarion is a family owned and operated LTC Home established in 1960 and has served the Stoney Creek and East Hamilton Communities since 1983. Clarion is the home to 78 residents with an average age of 85 (presently the youngest resident is 53 years old and the oldest is 105 years old). Clarion serves approximately 100 residents per year with a prevalent diagnosis of Alzheimer's or other types of Dementia, Diabetes and Hypertension. Clarion is classified as a "C" Home.

Due to Covid -19 Ministry of Health and Public Health Regulations, all the basic 4-bed rooms were converted into 2-bed rooms. We continue to provide basic (2 beds in the room), semiprivate and private accommodations.

Clarion is located in the centre of Stoney Creek, an area of great multicultural and ethnic diversity. The vast majority of the seniors in the Stoney Creek and East Hamilton population are of European origin often with limited or no ability to communicate in English. Clarion attracts a lot of clients (evident by LHIN applications and Clarion's current population) of European origin, especially Serbian, Croatian, Italian and Polish.

One of the contributing factors of why European origin clients choose Clarion is the fact that Clarion's staff is able to provide a variety of services in the residents' native languages supporting cultural, linguistic and religious needs, not only to the residents but also to their families.

Clarion Nursing Home has developed a Quality Improvement Plan (QIP) which represents the home's directions and priorities for the

upcoming year 2023-2024. In preparation for this QIP, Clarion undertook a strategic planning process to identify those key directives which will improve the overall quality of care provided.

Here at Clarion, we would like to think that we are a true Home to our residents, therefore our QIP was designed around improving our resident's experience and based on our resident's needs.

The goal of our QIP is to establish priorities, that align organizational, regional and system priorities, to be aware of our performance data and understand how to use this data to drive measurable improvement and to build capacity in our Home.

Recognizing that our Home is a part of a broader health care system, our QIP is aligned with regional and system level priorities to facilitate integration and care coordination across Ontario.

Our QIP addresses priority indicators as set out by Health Quality Ontario, such as:

- * Percentage of potentially avoidable emergency department visits for long-term care residents
- * Percentage of long-term care home residents not living with psychosis who were given antipsychotic medications
- * Do residents feel they have a voice and are listened to by staff
- * Do residents feel they can speak up without fear of consequences

Clarion strongly supports a "Client centred" model of care. We are endorsing the change in culture focused on creating flexible routines and decision making with residents and not for residents. We advocate a care model, where staff listen to residents, promotes resident empowerment, voice, self determination and participation in decision making.

Clarion encourages all residents and their families to communicate their concerns and suggestions, and to participate in our QIP development. The expressed needs of our residents are our priority. We believe that resident/family participation in the QIP development will ensure development of resident driven care.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Since the start of the Covid -19 pandemic, Clarion's main focus was on keeping our residents and staff Covid free. We have implemented strict Infection prevention and control (IPAC) protocols to minimize the risks of Covid-19 outbreak.

We are proud to say, that we did not have any major Covid-19 outbreaks resulting in resident deaths.

Quality Improvement initiatives related to IPAC practices:

- Designated IPAC Lead
- Follow up on all staff experiencing Covid like/Respiratory/GI symptoms
- Daily Rapid testing of all staff and visitors
- Enhanced staff education
- N-95 mask fitting

- Development/improvement of the Pandemic emergency plan

Recognizing that our Home is a part of a broader health care system, our quality improvement initiatives are aligned with regional and system level priorities to facilitate integration and care coordination across Ontario. Our priorities are aligned around common areas of focus-improving effective transitions. Our initiatives are related to:

1. Preventing unnecessary resident's transfer to Emergency Department (ED).

* In-House Nurse Practitioner (NP) position

- Access to timely clinical assessment of the acute and chronic cases
- Doctor's day/rounds/communication with attending physicians
- Discussions with residents/families regarding updates on medical status, advanced directives, goals of care
- Emotional support for the residents and families
- Liaison with other Health Care providers
 - LTC CARES initiative

2. Reducing usage of antipsychotic medications

* In-House Nurse Practitioner (NP) position

- NP/Pharmacist/Registered Staff/MD meetings. Communicating with residents/families

- Quarterly reviews
- Liaison with the other Health Care settings and Practitioners to ensure proper and timely access to outpatient Specialty care, such as mental health to ensure that residents are given the appropriate medications and support
 - LTC CARES initiative

3. Improving patient experience - Resident/family satisfaction with the services provided

* In-House Nurse Practitioner (NP) position

- Access to timely clinical assessment of the acute and chronic cases
- Participation in initial/annual family conferences
- Discussions with resident/family - updates on medical status, advanced directives, and goals of care
- Wound care management including wound care rounds
- Performing annual physical examinations
 - Emotional support for the Residents and Families

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

Clarion staff come from over 30 different cultural and ethnic backgrounds. Our staff is proud of their backgrounds and willing to share their unique way of living with other staff members. We have been organizing "Day Events" where a particular staff population present its culture to the other staff and residents - showcasing food, fashion, music and language.

We believe that cultural diversity is about appreciating that society is made up of many different groups with different interests, skills, talents and needs.

Cultural diversity is important because workplaces increasingly consist of various cultural, racial, and ethnic groups. Learning about other cultures helps us understand different perspectives within the world in which we live, and helps dispel negative stereotypes and personal biases about different groups.

In addition, cultural diversity helps us recognize and respect “ways of being” that are not necessarily our own, so that as we interact with others we can build bridges to trust, respect, and understanding across cultures. Furthermore, this diversity makes our workplace a more interesting place to live, as people from diverse cultures contribute language skills, new ways of thinking, new knowledge, and different experiences.

Examples of the initiatives that have been implemented based on the unique diverse population of our staff.

1. Incorporating various elements of the different cultures and backgrounds of our unique staff population during the staff get-together, for example Holiday staff lunch.

- ordering staff population specific cuisine in addition to the traditional food, for example Indian and

Mexican dishes

- incorporating staff population specific music, dance style and fashion
- incorporating a unique ways of celebration - together but in unique ways-

2. Implementing an "Arm chair travel" program. This program is design for residents and revolves around visual travel around the world, discussing various aspects of different cultures including geography and the population of each country, culture, cuisine, fashion, language and music, as well as a traditional dish of the country is served to residents.

PROVIDER EXPERIENCE

Clarion is dealing with a shortage of staff, particularly personal support workers and Registered nurses. Clarion is frequently unable to fill the required shifts which subsequently impact the quality of care that is provided to our residents.

High turnover and short staffing have been found to have many negative consequences, including reduced employee efficiency, issues with attendance, burnout and lower morale among employees who stay on the job.

The following are some major causes of stress, burnout, dissatisfaction, and turnover among our staff.

1. Work pressure.

Facing the staff shortages, many staff indicate that they routinely do not have enough time to complete

basic tasks for residents. This sense of time pressure not only takes the enjoyment out of their work, but also

increases the stress and make staff work in a rushed manner in order to be able to finish the task.

In addition, staff is not able to do the tasks that take extra time, such, walking with residents, socializing, among others.

The work is reduced to the most basic and necessary tasks, and when staff cannot complete even these tasks, the work related stress and burnout increases.

2. Understaffing

Work pressure is exacerbated by chronic understaffing and/or working with agency staff who do not have adequate

knowledge of resident's needs, the routine of the unit, and associated policies and procedures. Staff reports

that sometimes it would be easier to work short, than with the agency staff who need to be supervised and supported for the most part.

3. Wages

Difference in wages from nursing home to nursing home, make the homes with higher wages, especially the

municipal homes, more attractive for the new graduates, or even for the existing staff. Applicants looking for a

new jobs are comparing the wages, and even if they accept the position, they tend to move on once they receive a better offer.

4. Increased acuity and more complex care needs

Care for the residents with more complex care needs needs more nursing time. Staff tends to

call in more often when assigned to certain assignments, certain days.

Again, when the staff ratio is compromised, there is not enough time to provide care to residents with higher care demands. In this particular case, adding stress to the caregivers.

5. Issues related to workload management and staff calling in.

Friction among staff adds to work related stress. Staff may feel that they are not getting a fair share of the

workload assignment which cause friction between the unit supervisors and front line staff.

Staff may have negative feelings towards the staff who is calling in, blaming them for working short.

6. New applicants availability and work/life balance.

In recent years the need of having position/job and availability to work has shifted towards a person-centred

work/life balance. About 90% of the new applicants are available for certain shifts on very particular days with no flexibility in most cases. The task of scheduling became very difficult and time consuming. Covering all the shifts, became a challenge.

7. Lack of qualified applicants.

There are very few applications that we receive. The vast majority of the applicants do not call back, they are no show for the interviews, or do not follow -up with the job offer.

8. Existence of the staffing agencies.

There is a multitude of staffing agencies that have not existed prior to the pandemic. Many health care workers are attracted by the flexibility of work, and the hourly wages. It is discouraging to our staff to hear that the agency staff who needs the support from our staff while working at Clarion, is paid much more than they are.

9. Documentation/reporting requirements.

The burden of Red Tape, documentation and reporting to multiple levels of government, has resulted in the loss of the long term staff, and the inability to attract qualified replacements.

10. Registered staff workload.

We have lost a number of Registered staff due to increased workloads and documentation requirements. They accepted the positions with a lighter workload and better pay at the local hospitals.

Engagement of our staff in identifying opportunities for improvement:

Staff meetings/communication with staff. Some of the examples:

1. We offer flexible scheduling and have an established process of staff shift change opportunities.
2. One-on-one conversation with staff regarding their schedule flexibility/ availability
3. Utilization of staffing agencies
4. Indeed job postings
5. Alliance with training Institutions - Mohawk College and other institutions - accepting PSW students for clinical placement

Support available for staff

1. Open communication with staff to discuss the staffing situation, listen to concerns and suggestions
2. Scheduling flexibility

3. All staff(activity, administration and other disciplines as necessary) assistance with- for example assisting in dining room, assisting with meals when staff is working short.

4. Advancement opportunities

5. Cross training

5. Paid staff education

6. Staff recognition/appreciation program

WORKPLACE VIOLENCE PREVENTION

The Management of Clarion Nursing Home is committed to the prevention of workplace violence and is ultimately responsible for workers health and safety.

Clarion will take whatever steps are necessary to protect it's workers from workplace violence from all sources.

There is a workplace program and a policy in place. The policy includes measures and procedures to protect workers from workplace violence, a means of summoning immediate assistance and a process for workers to report incidents or raise concerns.

Clarion, as the employer, will ensure that the policy and the supporting program are implemented and maintained, and that all workers and supervisors have the appropriate information and instruction to protect them from violence in the workplace.

Every worker must work in compliance with the policy and the supporting program. All workers are encouraged to raise any concerns about workplace violence and to report any violent incidents or threats; there will be no negative consequences for reports made in a good faith.

Management investigates and deals with all incidents and complaints of workplace violence in a fair and timely manner, respecting the privacy of all concerned.

The incidents of workplace violence and incivility are reviewed during the Health and Safety Committee meetings on a quarterly basis.

PATIENT SAFETY

The process of following up on the safety incidents involving residents.

1. Resident assessment.

The priority is always focused on resident safety. Depending on the type of incident, a proper assessment is conducted by Registered Staff to determine the resident's condition and need for further interventions; transfer to the hospital vs treatment at Home.

2. Investigation to determine the root cause of the incident.

All incidents are investigated to determine the reason. The investigation is conducted at the time of the

incident and post incident by the Nurse in Charge. CIS may be submitted if appropriate.

3. All incidents are reported/investigated as part of the Risk Management follow-up. Once the investigation is completed, all incidents are signed off by DOC/RDOC and then the Home Administrator. In addition, all safety incidents (CIS) are reviewed at the quarterly Medical Advisory and QI meetings.

To be able to prevent safety incidents from occurring/re-occurring, it is important to know the root origin of each incident. The cause/possible cause of each incident is evaluated and corrected at the time of the incident if possible and/or post incident.

As part of the investigation, to better understand the reason, staff and families are consulted.

Any changes to the practices or policies as a result of the incident follow-up are communicated to the staff at the shift change reports and staff meetings in addition to the written notifications.

In addition, changes to the practices or policies are communicated to the families if appropriate - over the phone, thru mail, by posting notification on the Bulletin board and thru Family Council.

HEALTH EQUITY

Clarion recognizes the dignity and worth of each person and endeavours to provide for equal rights and opportunities without discrimination.

We believe that diversity is all about the individual, the unique dimensions, qualities and characteristics that we all possess.

Inclusion is about all of us collectively, and how we strive for equity by respecting and accepting all difference in values.

Diversity and inclusion is about creating an environment that values and respects each individual for their unique talents, skills and abilities for the benefit of the collective.

Clarion welcomes all diverse populations including Indigenous, Black, racialized and 2SLGBTQIA+ communities.

2SLGBTQI+ is an acronym that describes a variety of sexually and gender diverse people, including those who identify as lesbian, gay, bisexual, trans, queer, intersex, and Two-Spirit.

Members of sexually and gender diverse communities experience stigma and discrimination that contributes to poor health and well being. Clarion does not support any kind of stigmatization, discrimination and social exclusion based on sexual orientation, gender identity and gender expression. Perception and assumption about sexual orientation, gender identity and gender expression can be harmful and create conditions that result in human rights violations and health inequities.

We believe that each individual should be provided with safe and inclusive care:

- asking for names and pronouns
- being open minded and not judgemental
- only asking questions needed to provide care
- keep the health information safe
- being informed on 2SLGBTQI+ health through ongoing education

- being informed on other diverse populations through ongoing education

Clarion is located in the centre of Stoney Creek, an area of great multicultural and ethnic diversity. The vast majority of the seniors of the Stoney Creek and East Hamilton population are of European origin often with limited or no ability to communicate in English. Clarion attracts a lot of clients of European origin, especially Serbian, Croatian, Italian and Polish.

One of the contributing factors of why European origin clients choose Clarion is the fact that Clarion's staff is able to provide a variety of services in the residents' native languages supporting cultural, linguistic and religious needs, not only to the Resident but also to their families.

Clarion does not collect specific detailed sociodemographic data, including race-based data at the present time.

CONTACT INFORMATION/DESIGNATED LEAD

WE WOULD BE PLEASED TO SHARE OUR EXPERIENCE WITH OTHER INSTITUTIONS.

Contact information:

Barb Szeremeta
Director of Care
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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 24, 2023**

Michael Janjic, Board Chair / Licensee or delegate

Michael Janjic, Administrator /Executive Director

Barb Szeremeta, Quality Committee Chair or delegate

Other leadership as appropriate
