

Quality Improvement Report

June 2023

Overview

Union Villa resides on the campus of the Unionville Home Society, a charitable, non-profit organization. It was formed in 1967 by local citizens who wished to see a more adequate and creative provision of care made for older persons in York Region. Union Villa was rebuilt in 2005 and is accredited through CARF and licensed by the Ministry of Long-Term Care. We are home to 160 residents, on five home areas, where individual wishes, interests and preferences direct our *Resident First* philosophy for providing care and services.

The organization promotes wellness, independence, quality of life and self-determination of the individual within a caring community with exemplary care and services. We value integrity, professionalism, excellence, respect, creativity and caring. These values are subscribed to and supported by our Board of Directors and staff members and guide the organization's interactions with its residents, their families, external organizations and members of the community.

Our Quality Process

Our Quality Council is led by Olga Gluchovsky, our Clinical Quality Educator. The Council leads our team in quality initiatives that stem from best practices and applicable legislation set out by the Ministry of Long-Term Care (Fixing Long Term Care Act 2021) and Public Health. The pillars of our strategic plan 2020-2025 include innovative seniors' care, strong partnerships, a sustainable organization and a healthy organizational culture. These pillars align with our internal quality initiatives and our Quality Improvement Plan (QIP) as we strive to develop initiatives that are meaningful to our residents, family members and staff and our vision to create a progressive community where older adults thrive, age well and live better.

A number of key performance indicators are tracked across the organization that are reviewed monthly by each department and on a quarterly basis by the Quality Council. Union Villa also prepared a Quality Improvement Plan (QIP) for submission to Health Quality Ontario on some key initiatives across our sector.

We value feedback from all our stakeholders, both internal and external. The activities of our Quality Council are accountable to the Union Villa Professional Advisory Committee, the Senior Leadership Team and the Board of Directors.

Our Residents' Council and Family Council remain important partners in our quality initiatives, through their suggestions, questions, and meeting updates. Quality initiatives and other information is shared with residents, families and staff on our website and through the following publications:

1. In the Loop - weekly digital staff newsletter - In the Loop

- 2. The Villa Vibe a monthly publication for residents featuring coming events and announcements
- 3. Administrator Updates monthly digital newsletter for residents, families, staff, campus clients
- 4. Administrator Bulletins as needed bulletins for important updates to all residents, families, staff and stakeholders
- 5. The Society Scoop quarterly Corporate Newsletter
- 6. Annual Report published annually in June

A Year in Review April 2022 - March 2023

In April, 2022, we began our implementation of the Fixing Long-Term Care Act (FLTCA). As this continues, we have focused on expanding our existing Quality Council to include the additional members identified in the FLTCA 2021. Quality improvement policies were reviewed and updated. The collection and analysis of key performance indicators continued, and quarterly reports were prepared for submission to our Board of Directors, Residents' Council and Family Council. Preparations for our 2023 CARF survey were also an important focus.

We continued to focus our quality initiatives on programs and improvements to meet the needs of the population we serve. These included:

- I. Enhancement of resident care programs to ensure best practices are followed. These included infection control, pain management, falls, wound care and medication management. Our data collection tools for these programs have been evaluated to ensure the collection of all relevant data.
- 2. As funding allowed, staffing levels were evaluated and revised to ensure we are working towards the government goal of 4 hours of care for every resident.
- 3. Resident, Family and Staff satisfaction surveys were completed in 2022 to ensure we keep in tune to suggestions and improvement opportunities.
- 4. Development of our Palliative Care program is underway as our committee looks at our existing policies and makes improvements to our end-of-life care.
- 5. Facility upgrades were made to ensure all resident rooms are air conditioned. New chairs that are easy to clean were purchased for all resident rooms. Also, plans for the removal of carpet in resident areas and room updates are a focus for us.
- 6. Technology updates are continuing to ensure laptops and tablets will be available for staff to facilitate point-of-care documentation in a more timely and efficient manner. Additional modules have been added to our electronic resident documentation system for infection control and practitioner engagement.

Every fall, we conduct a Resident/Family Satisfaction Survey. The results are shared with staff, residents, family members and our Board of Directors. Our results from December 2022

show a high level in overall resident satisfaction at 90% while the level of family satisfaction remains consistent at 98%. From this survey, there is an opportunity for improvements in communication, activity programs and meal service and action plans have been developed for these areas.

The last few years have placed enormous pressure on our staff due to the uncertainty of Covid, burnout from the lack of staff across the system and the reputation of long-term care. We continue to support our staff in a number of ways:

- Communication through our weekly employee newsletter "In the Loop".
- Education on-line, in-person sessions and external opportunities. We also offered a bursary program, provided through a generous donation from the family of a former resident, to staff and/or their children.
- Recognition celebrations for each department throughout the year, holidays and special treats.
- Staff activities through "The Crew" a group of employees who spearhead staff events.
- Huddles, meetings, committee involvement within departments and across the organization.
- Time off remote work policy and disconnecting from work policy were developed.
- Covid pay Staff received regular pay from the onset of symptoms until a negative PCR test is received or until the conclusion of the isolation period for positive cases.
- Employee assistance program for staff access to outside services on a variety of topics such as mental health, wellness, finance.

In our strategic plan 2020-2025, one of our pillars is "A Healthy Organizational Culture". We recognize this as the building block of a thriving organization with a focus of investing in our people to ensure they are empowered, supported and appreciated. Our commitments to this include:

- Reviewing our operations and human resources policies to identify challenges and opportunities for improvement.
- Promoting a culture of teamwork that supports staff and volunteers to be engaged and empowered.
- Enhancing our internal communication processes to promote effective collaboration and engagement across our campus.
- Supporting ongoing training, education and professional development so that staff learn and grow.

UHS is committed to the health and safety of its residents and has put into place comprehensive reviewing and monitoring mechanisms to ensure the proactive monitoring of the resident environment. All incidents and critical incidents are documented and reported to internal and/or external persons requiring notification. All incidents/critical incidents that pose a risk to residents are reported to the Nurse Manager/Director of Care immediately. Resident incidents are thoroughly investigated and reviewed at department meetings and huddles as opportunities for learning and improvement.

Union Villa is fortunate to serve a very diverse community of residents. We celebrate cultural theme days and holidays through entertainment, communications, and our social media. Our staff are also very diverse, and they serve as translators for our residents to ensure their voice is heard and their needs are met. Recently, we also purchased electronic translators for each nursing unit.

There are specific programs to support many different religions. Our Pastor liaises with local spiritual leaders to ensure inclusivity and opportunities for all residents to practice the faith of their choice. Many of our church groups support us through our volunteer program by providing volunteers for services and friendly visits.

We work closely with Behaviour Support Ontario to improve the quality of life for our residents with dementia and managing their behaviours. We firmly believe that every behavior has a cause, and we are fortunate to have a full-time Behaviour Support Nurse to assist staff with both education and identifying non-medical interventions to help our residents.

Priorities for 2023-2024

We will continue to build on the initiatives highlighted above along with the following priorities:

Resident/Family Survey Action Plan

Our annual Resident and Family Satisfaction survey was conducted in November of 2022. All residents of the home were screened for eligibility using inclusion criteria Cognitive Performance Scale (CPS) of 0-3 as per the RAI-MDS assessments to create a list of residents eligible for the survey. A list was established identifying residents who were able to understand and participate in the survey.

Powers of Attorney (POAs) for care (I per family) were offered the opportunity to complete the satisfaction survey even if the resident was not eligible to participate in the survey. The survey was available in both electronic (Survey Monkey) and paper formats.

The survey contained a combination of questions including:

- Questions with a six (6) point scale (always, usually, sometimes, never, don't know, not applicable).
- Home Specific questions based on input from Family and Resident Councils including COVID-19 questions.
- Program related questions asking for feedback on core programs including falls management, skin and wound management, continence management, restraint minimization and pain management.
- Open ended questions allowing the respondents to indicate what they liked about the home and suggestions for improvement.

Greater than thirty (30%) percent response rate is considered good in surveys of this type and our results are shown in the following table.

	# Distributed	# of Responses	Response Rate 2022	Response Rate 2021
Resident Surveys	47	31	67%	86%
Family Surveys	155	49	32%	40%

Overall Satisfaction was determined in 2 key questions in the survey as illustrated below.

- "How would you rate our home overall?"
- "Would you recommend Union Villa to a family member or friend needing long term care?"

Our results show an increased level in overall resident satisfaction at 90% while the level of family satisfaction remains consistent at 98%.

	Resident	Family	
Home rated as excellent/very	2022 - 90%	2022 - 98%	
good/good	2021 - 83%	2021 - 98%	
Positively (definitely/probably yes)"	2022 - 87%	2022 - 98%	
recommend Union Villa to a family	2021 - 81%	2021 - 98%	
member or friend			

Residents and family members generally have high levels of satisfaction with the care and services provided by Union Villa. Satisfaction has improved in the following areas as compared to the 2021 survey, moving from "needing improvement" in 2021 to "doing well" in 2022.

•	<u> </u>	_	
	Item	2021	2022
Resident Survey	Staff respect my privacy	83%	94%
	Staff Treat me with respect	87%	94%
	I can express my opinion without fear of	83%	94%
	consequences		
	Staff available within a reasonable time	74%	87%
	I receive care that meets my needs	85%	99%
	Temperature in the home	84%	87%
	Staff listen to me	86%	87%
Family Survey	My family member likes the activities provided	73%	89%

There are, however, a few areas identified for improvements. Opportunities for improvement can be identified qualitatively and quantitatively. Questions receiving greater than 15% rating in the "never, sometimes" category are considered to be a red flag for the home to further investigate and possible priorities for improvements. Ideally three to four opportunities for

improvement should be identified. This controlled number allows the organization to focus its improvement efforts to achieve success. Our results for possible areas of improvement are summarized in the following table.

	Item	2021	2022
		Never/	Never/
		Sometimes	Sometimes
Resident Survey	I am given opportunities to make decisions about	24%	19%
	my care		
	I like the activities provided	22%	19%
	There are activities that support my	16%	35%
	religious/spiritual beliefs		
	I have access to enjoyable things to do on	15%	29%
	weekends		
	Overall quality of food and drinks	40%	22%
	Good variety of food and drinks	32%	19%
	I am aware of who to contact to initiate a	31%	30%
	concern/complaint		
	I receive updates about my health	45%	23%
	The physician explains things in a way I can	24%	20%
	understand		
	Pain Management	43%	40%
	Usually read and enjoy the monthly newsletter	37%	36%
	Enjoy having more small group programs on my	20%	37%
	unit		
Both Surveys	Mealtime is pleasurable – Resident	24%	19%
-	- Family	24%	17%

These results highlight three main areas of focus:

- Communication
- Meal Service
- Activity Programs

For improvements on communication, education continues to be provided to the residents on complaints process through Resident Council meeting discussion, information bulletins posting and monthly newsletter communication. In addition, residents continue to be invited to participate in interdisciplinary care conferences, as well as discussions of treatments and care with physicians and the care team.

Meal Service was identified as an additional area of improvement. Performance improvement initiatives will include development of a Pleasurable Dining strategy with improvements to ambiance and established job routines and meal service assignments to ensure pleasurable dining experience.

Activity programs will be another focus for improvement. Our Recreation team continues to engage residents in meaningful activities with the provision of additional small group activities to allow every resident participating to engage in the activity offered. Additional goal initiatives include portable library cart with variety of books and magazines to be provided to residents, as well as forging relationships with external religious group leaders to provide multi-denominational services and activities to meet the needs of multicultural population of residents living in the home.

Health Quality Ontario QIP

One of the priority goals for the year 2023-24 is the reduction of potentially avoidable Emergency Room transfers with current home's performance being at 17.89% and target goal of 17%. Union Villa is committed to promote person centered care and quality of life by providing prompt in house care within our available resources. A number of initiatives have been taken to achieve this target goal, such as discussion of Advanced Care Planning and Palliative versus End-of-life care with families and residents upon admission and during the 6 weeks care conference. In addition, education for staff is underway on comprehensive assessment and communication with interdisciplinary care team.

The reduction in number of residents who are given antipsychotic medications without diagnosis of psychosis is also being reviewed. Currently, our home's performance is 23.38% and the target goal of 21%. We are working collaboratively with internal and external health care providers such as BSO lead, BSO Outreach team and Geriatrician, who continue to work and support our interdisciplinary care team with assessments and care interventions recommendations. The review of prescribed antipsychotic medications usage is underway to potentially de-prescribe them if they are no longer required. Education on Gentle Persuasive Approach (GPA) will be provided to all direct care staff.

Lastly, as part of person-centered QIP domain, we have included a communication component related to our results from the Resident/Family Satisfaction Survey. Survey responses for "how well staff listens to them" and "expressing their opinion without fear of consequence" were identified as priority areas for improvement. Education will be provided to residents on the Whistle Blower protection policy and the complaints/concerns reporting process. In addition, electronic translators have been provided to all units to assist with multilingual communication. Ongoing education of staff on customer service and the revised Residents' Bill of Rights will also be completed.

Accreditation

Our Accreditation survey with CARF was held from May 3-5, 2023, and their report has just been received. We are proud to say that we have been awarded a 3-year accreditation once again with substantial conformance to over 1700 standards. The report is now under review and an action plan will be developed to address their recommendations.

Electronic Documentation

We will be implementing a new Skin and Wound module that will allow us to track, evaluate and measure the healing of wounds. Work will continue on the Practitioner Engagement Module with a roll-out to all physicians by the fall of 2023.

Point-of-Care documentation with tablets for PSWs is slated to begin over the next few months once our Wi-Fi upgrades have been completed. Also, care conference summaries will be completed electronically starting in July 2023.

Resident Care Plan Updates

All of our care plans are being reviewed to ensure they are individualized, as much as possible, for each specific resident. On-going updates will occur for any significant changes in resident status.

Infection Prevention and Control (IPAC)

Even with the de-escalation of Covid measures, IPAC must remain a priority for long-term care. Continued use of the IPAC module, provided through Point Click Care, will help to identify and track resident infections. IPAC audits and education will continue under the leadership of our Director of IPAC and Inspection Protocols.

Building and Equipment Upgrades

Our building is almost 20 years old now and is starting to show some signs of age. During Covid, a number of projects were delayed. A comprehensive assessment of building improvements was completed and projects are now proceeding in many areas such as Wi-Fi, heating and air conditioning, plumbing, electrical and exterior enhancements. Equipment is purchased when needed through our Foundation from our generous donors. This fall, we hope to make some enhancements to our dementia care unit to make it more welcoming and engaging for our residents with dementia.

Promoting and Improving Long-Term Care

Union Villa is committed to promoting long-term care as an industry and a career where people can make a difference every day. We welcome students placements from a variety of disciplines and provide staff preceptors for orientation and training.

We are currently in partnership with Seneca College and Ontario Health on research projects to combat resident loneliness in long term care and to identify changes in resident status earlier. Projects like this highlight our entire industry and could lead to some innovative thinking and processes.

Advocacy in long-term care is also very important. We are proud members of AdvantAge Ontario and our CEO serves on the AdvantAge Board. Our staff sit on a number of advisory committees with the Ministry and Ontario Health. We are very connected to this industry and these relationships are an important conduit to educate the government and other stakeholders about the needs and challenges within the long-term care sector.