

Continuous Quality Improvement Report 2024/ 2025

MISSION: A Caring Community Which Values and Fosters the Worth and Lifestyle of All"

BACKGROUND:

Trinity Village shall develop and implement a quality improvement and utilization review system that monitors, analyzes, evaluates, and improves the quality of the accommodation, care services, programs, and goods provided to staff, residents, family, volunteers, partners, and service and suppliers.

Quality Improvement is a systematic approach to making changes that lead to better resident outcomes (health), more robust system performance (care), and enhanced professional development. It draws on the combined and continuous efforts of all departments and stakeholders, including residents and their families, to make better and sustained improvements.

Attributes of a High-Quality Health System share the common vision of a high-performing health system that is accessible, effective, safe, resident-centered, equitable, efficient, appropriately resourced, integrated, and focused on resident health. Online Web: www.hqontario.ca/quality-improvement

Ontario Ministry of Health and Long-Term Care recognizes the Commission on Accreditation of Rehabilitation Facilities (CARF) Accreditation for long-term care homes. Achieving accreditation requires a service provider to commit to quality improvement, focus on the unique needs of each person the provider serves, and monitor the results of the services. In 2022, we received a 3-year Accreditation award for Person-Centered Long-Term Care Community, Dementia Care Specialty, and Governance programs.

Continuous Quality Improvement (CQI) at Trinity Village is every employee's responsibility, and improving service is paramount to our residents.

Foremost, the CQI Team must consider governance such as:

- Ministry of Health and Long-Term Care (MOHLTC)
- Health Quality Ontario (HQO)
- Commission on Accreditation of Rehabilitation Facilities (CARF)
- Home and Community Care Services Waterloo Wellington, Ontario Health L-SAA Agreement as it relates to the mission.

The "Quality Improvement Program" shall focus on ensuring optimal care and service delivery for Residents, Staff, and Families.



Continuous Quality Improvement Designated Lead: Debby Riepert, COO

PROGRAM:

Model for Improvement

- AIM What are we trying to accomplish?
- MEASURE How will we know that the change is an improvement?
- · CHANGE What changes can we make that will result in an improvement?

Annually, each department, team, and committee completes an Annual Review as follows:

- 1. Are the number and duration of meetings sufficient
- 2. What went well this year?
- 3. What can be improved upon?
- 4. Are there surveys that occurred this year?
- 5. Were stats reviewed and analyzed annually?
- 6. How were the stats shared with the department/committee/team, residents council, and family council?
- Was the Continuous Quality Improvement Tool used? NEW 2024: Quality Improvement Tool Checklist aligned with Trinity Village processes.
- 8. What support or education would be helpful for the coming year?
- 9. Did the SMART Goals require new or revised policies?
- 10. Did the SMART Goals require a review of job descriptions/duties?
- 11. CQI Indicators
 - Stats Documentation Completed
 - 3-year comparison for trending benchmark setting purposes
 - Identify indicators of significant change / outside benchmark
 - Record "Celebrations and Improvements"
- 12. CQI Indicator change request:

Add Delete

Revise

13. SMART GOAL Categories

- Finance (cost savings)
- Health & Safety
- Strategic Plan
- Staff Experience Survey
- Staff Orientation/Probation Check-In Survey
- Resident/Caregiver/Staff Well-being Survey
- Resident and Caregiver Orientation Survey
- Risk
- Complaints
- Ministry of Health Critical Incident System



- CARF Quality Improvement Plan
- Ministry of Health Resident Quality Inspection
- Health Quality Ontario; Quality Improvement Plan

The manager and committee lead recommend improvement items from the gathered data and areas identified. Departmental goals are not to exceed 200 hours annually (based on 1950 hours / full time) and to allow for job duties and daily changes within the healthcare sector.

Facility goals are reviewed and determined by all managers and recommended to the Board for approval and to residents, staff, and resident and family councils for feedback.

The Strategic Goals Report Card is posted quarterly in each home area and shared with the Board at the Monthly Resident Meeting, Public Communication Binder at reception, and Resident and Family Councils.

The Continuous Quality Improvement Committee reviews the Trinity Village HQO Report Card at the TVCC CQI Committee Meeting on the 4th Thursday of April, July, October, and January to review the previous quarter and post it in the staff rooms. Quality improvements are not limited to quarterly and annual reviews but as needed.

2024 Quality Improvement Processes

2023 Annual Review Celebrations and Improvements (includes Resident/Care Partner Survey Highlights) [<u>Please Click Here]</u>
2024 Strategic Goals Report Card [<u>Please Click Here]</u>
2024/25 Health Quality Ontario Annual Narrativ [<u>Please Click Here]</u>
2024/25 Health Quality Ontario Quality Improvement Plan

#1 ED Visits - Reduce Potential Avoidable Visits

- Track and trend avoidable ED transfers, not just look at how may hospital transfers occurred. Nurse Practitioner and Assistant Director of Care Review to improve approach and follow-up in regard to ED visits.
- \circ 19.9 to 10.3 goal to be below 10

#2 Antipsychotic Rate

 Trinity Village Care Centre has initiated a targeted approach to reducing Antipsychotics without a diagnosis. We are committed to ensuring resident safety and improving quality of life; antipsychotics must be tapered off safely and correctly after a period of adjustment at Trinity Village Care Centre. The Antipsychotic Committee, a sub-



committee of the BSO Team, meets Quarterly to review all residents on an Antipsychotic to ensure proper indication for use.

 Goal to reduce the percentage of residents on antipsychotic medication without a diagnosis of psychosis from 9.1% to 7% by Q2 2025.

#3 Skin and Wound

- Trinity Village has seen an increase in worsened wounds due to increased monitoring and methods of capturing data. New software and data analysis implementation has allowed for better data capturing and new protocols to improve wound care within the home.
- To decrease the percentage from 4.4% for worsening pressure injuries to the provincial average of 4% by December 31, 2024

On behalf of the residents and staff,

Respectfully yours,

Debby Riepert, Chief Operating Officer