

Let's Make Healthy  
Change Happen.



## Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



3/30/2023

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

[ontario.ca/excellentcare](https://ontario.ca/excellentcare)

## Overview

Wentworth Lodge is one of two long-term care homes owned and operated by the City of Hamilton. The home has 160 beds. Our affiliate home is Macassa Lodge, located in Hamilton. Macassa Lodge has 270 beds. The Mission of both Lodges is to provide person-centred long-term care that promotes well-being and creates opportunities to maximize the quality of life of our 160 residents.

Our mission statement influences the annual Quality Improvement Plan by emphasizing initiatives and measures that aim to improve high priority areas focusing on the needs, values, and preferences of the whole person. These goals can be difficult to attain in the long-term care environment due to multiple factors, which were exacerbated by the COVID-19 pandemic; however, our dynamic team of People Leaders, staff, Physicians/ Nurse Practitioners', community partners, and Resident/ Family Councils remain committed to continuous quality improvement and are enthusiastic about Quality Improvement Plan initiatives and measures for 2023-24.

When planning our annual Quality Improvement Plan, Wentworth Lodge used several sources of information to create an informed plan that reflects the needs of the resident and considers other factors such as the current LTC environment in Ontario, internal/ external resources and strategic (operational) priorities. For example, we use feedback from residents and family members obtained through annual satisfaction surveys, monthly Resident and Family Council meetings, formal/ informal discussions, as well as identifying trends reported through concerns/ complaints and "Tell Us How We Are Doing" forms. Wentworth Lodge's Quality Improvement Committee and External Quality Improvement Committee continually monitor annual Health Quality Ontario/ Quorum recommendations, quarterly CIHI performance indicators as well as other program specific key performance indicators and program evaluations which help identify current performance and trends over time. Baseline performance has been evaluated for each focus area and improvement targets have been set based on provincial/ local benchmarks and resources available to successfully implement improvements.

There are seven Corporate Priorities embedded in the City of Hamilton Strategic/ Operational Plan (2016-2025). They are:

- 1) Community engagement and participation
- 2) Economic growth and prosperity
- 3) Healthy and safe community
- 4) Our people and performance
- 5) Clean and green
- 6) Built environment/infrastructure
- 7) Culture and diversity

There is alignment between Wentworth Lodge's Operational Plan and the 2023-24 Quality Improvement Plan with the following Corporate Priority areas:

Strategic Priority #1: Community engagement and participation aligns with QIP focus area Improving resident and family experience.

Strategic Priority #3: Healthy and Safe Communities aligns with QIP focus area Reducing worsened pain.

After taking these sources of information into consideration, Wentworth Lodge will focus on the four following key areas on our 2023-24 Quality Improvement Plan, as recommended by Health Quality Ontario:

- 1) Reducing avoidable Emergency Department transfers
- 2) Improving resident and family experience
- 3) Reducing anti-psychotic use, and
- 4) Reducing worsened pain (through improved palliative care approaches)

## Reflections since your last QIP submission

Wentworth Lodges 2022-23 Quality Improvement Plan focused on reducing anti-psychotic use for residents without a diagnosis of psychosis. We have chosen to continue improvement efforts by making reduction of anti-psychotics a priority in 2023-24, by building on progress made in the past year. The team feels there is still room for improvement and has chosen to dedicate resources towards providing re-education, completing individualized pharmacist and physician reviews for residents currently taking anti-psychotic medication, and utilization of an antipsychotic monitoring tool.

Moving forward with our quality planning for 2023-24, we developed and implemented an Extended Quality Council with enhanced and meaningful representation from residents, family members, advocates, and varied levels of staff. Bringing "quality" to life in our home brings "quality of life" to our residents in new and expanded ways. We are genuinely optimistic about the chance to progress from the pandemic, use the many lessons learned through that experience, and take advantage of opportunities and innovations to build upon our quality plan.

Along with our affiliate home, Macassa Lodge, Wentworth Lodge participated in the Healthcare Excellence Canada project in 2022. This goal of this project is to streamline and simplify the care plan library to decrease the volume of verbiage and options available to ensure staff clearly understand the specific needs and preferences of the residents using a person centred language approach. We are particularly proud of this accomplishment because upon completion, front line staff use appropriate, respectful, life affirming and inclusive language when talking with, documenting, and referring to Residents that may communicate via responsive behaviours or personal expressions associated with dementia, complex mental health, substance use and/or other neurological conditions, and their care partners.

Wentworth Lodge began work to update operational changes per the Fixing Long Term Care Homes Act, 2021 per MLTC prescribed timelines for progressive implementation. Lastly, both Wentworth and Macassa Lodges are preparing for CARF Accreditation surveyors to be on-site for our voluntary accreditation survey in the summer of 2023. Accreditation demonstrates a home's commitment to quality improvement and is an exciting opportunity to showcase our efforts to continually improve care and service delivery!

## Patient/client/resident engagement and partnering

Wentworth Lodge prioritizes resident and family engagement and actively seeks advice/recommendations regarding quality improvement, Resident and Family Satisfaction, as well as other initiatives throughout the year. We use several mechanisms to help maximize opportunities for residents and family members to participate as they choose to. Examples of resident and family engagement strategies include, but are not limited to:

- a) Completion of annual Resident Satisfaction/Family Satisfaction survey in November - December 2022. Overall 2022 satisfaction rates of 92% decreased comparatively to 2021 rates of 97%.

- b) Engagement and advice is sought regarding the annual Resident and Family satisfaction survey tool, annual roll out of the survey, outcome reports, and developing/prioritizing action items and dates. Survey results were shared at the February Resident Council and Family Council Meetings. Full Survey results are posted on both the Family and Resident Council Communication Boards for all Residents, Families, Caregivers, and Staff review.
- c) Participation in development of annual Quality Improvement Plan initiatives and measures. A copy of the annual QIP is provided to Resident and Family Councils, and is posted on our website and within the home.
- d) Completion of annual Food Services Survey including developing and prioritizing action items based on outcomes.
- e) Participation on monthly Family/Resident and Food Council meetings
- f) Active participation and decision making during the Post-Admission and Annual Multidisciplinary Care Conference.
- g) Completion of "How Are We Doing" forms to identify compliments, areas for improvement, or concerns.
- h) Participation on CARF Accreditation preparation activities.
- i) Open communication with staff and the Leadership Team is always encouraged.

Wentworth Lodge works in close collaboration with a variety of our system and community partners when developing and initiating quality improvement initiatives for the benefit of our residents. Examples of some of this work is listed below:

a) Annual completion of Resident and Family Satisfaction surveys and developing/prioritizing action items based on outcomes. Advice is sought from the Resident and Family Councils each year as we prepare for roll-out of the survey. Further, progress reports are provided on a regular basis regarding survey completion, reporting of outcomes and dates of actions, and development of additional action items.

b) Annual (HQO) Quality Improvement Plan - Wentworth Lodge is working in collaboration with the City of Hamilton Paramedic Services to reduce avoidable Emergency Department transfers as part of the Paramedicine Pilot Project in 2023-24. We will also be working in partnership with our contracted pharmacy, Care Rx, to reduce potentially inappropriate anti-psychotic use in our home. Advice and recommendations were sought from Resident and Family Council members during development of the annual Quality Improvement Plan.

c) CARF Canada - Wentworth and Macassa Lodges will be having our on-site CARF Accreditation survey in the summer of 2023. Accreditation is a voluntary process that organizations use to evaluate performance against standards of care and improve the quality of care and service delivery. Residents and Family members are invited to participate in CARF preparation activities.

Improvement initiatives are identified through the Quality Committee's monitoring, review, and recommendations based from several sources of input from Residents, Family, Staff and other Stakeholders and the monitoring of goals and indicators including:

- Quality Indicators
- Balanced Scorecard
- Resident Council
- Family Council
- Food Committee
- Annual Program Evaluations
- CARF Accreditation Feedback/QIP
- Required indicators for Health Quality Ontario/QIP

- Requirements/feedback from the Health and Safe Communities Department/City of Hamilton
- Satisfaction Surveys
- Complaints
- How Are We Doing? Reports

The Multidisciplinary Lodge Quality Committee:

- Sets the expectations for performance measurement and improvement.
- Develops, reviews, and revises the Continuous Quality Improvement (CQI)/Quality Plans.
- Ensures quality indicator data is collected and documented.
- Directs and monitors the program as part of the regular Management Team Agenda. Issues are presented, discussed and follow-up actions are determined.
- Reviews/revisions to the quality program are completed as needed.
- Provides resources to support CQI activities and initiatives.
- Encourages and supports staff participation with CQI activities and focus groups through ongoing dialogue, education activities and the performance review process.

Other System and Community Partners Include:

- Home and Community Care Support Services Hamilton
- Hamilton Health Sciences
- Hamilton Public Health
- Alzheimer Society (PRC)
- AdvantAge Ontario/ AdvantAge Ontario Region 2 Administrators Group
- McMaster University
- Public Health Agency of Canada
- Healthcare Excellence Canada
- Hamilton Police Services - Senior Support Officer
- Hamilton Fire Services
- CARF Canada
- Behavioural Supports Ontario
- RNAO Best Practice Coordinators
- Psychogeriatrician
- Medical Director, Physicians and Nurse Practitioners
- Ministry of Long-Term Care
- Canadian Learning and Research Institute
- LTC Cares Clinical Support Program
- TENA (continence products)

## Provider experience

March 10, 2023, marked the three-year anniversary of the COVID-19 pandemic. The residents, staff and families of Wentworth Lodge have endured three years of the pandemic. We are learning to adapt to the "new" norm at Wentworth Lodge.

Despite the waves of challenges faced during the past three years, and the obvious impact this would have on outcomes, Wentworth Lodge staff provided a 94% positive response in 2022 that they are proud of the work they do at The City of Hamilton, and an 87% positive response they are satisfied with their job.

The City of Hamilton continues to keep health human resources a top priority and has several strategies in place to provide a work environment that is healthy, safe, inclusive, accessible, and supportive. Some strategies that are currently in place to support and sustain these priorities include, but are not limited to:

- Gradual increase to four hours of care by 2025

- Dedicated talent specialist to focus on health human resources at both Lodges
- Maintenance of IPAC practices such as daily COVID-19 screening and hand hygiene/ PPE audits to promote a safe work environment
- Frequent contact with HHS and Hamilton Public Health Partners to ensure IPAC practices are per best practices and are being sustained
- Sharing of positive compliments received from residents and families
- Employee assistance program is available to all staff and immediate family members free of charge

## Workplace Violence Prevention

Wentworth Lodge works in collaboration with several partners to implement strategies, policies, and procedures to monitor, reduce, and prevent workplace violence that also promote resident safety. Below is a list of strategies that have been implemented as well as a list of partners that Wentworth Lodge works with to ensure strategies are monitored and sustained.

Strategies to Prevent Workplace Violence and Promote Resident Safety:

- Expectation that all staff at all levels comply with Occupational Health & Safety Legislation and Standards.
- Topics related to Occupational Health & Safety and Workplace Violence prevention are reviewed with new hires during onboarding and annually thereafter per OH&S, MLTC, and CARF Accreditation standards.
- Topics related to Workplace Violence prevention are reviewed during onboarding of volunteers per CARF Accreditation and MLTC standards.
- Multidisciplinary Joint Occupational Health & Safety Committee includes workplace inspections, department specific audits and follow-up on identified deficiencies.
- Action plans to address (high or low risk) non-compliances identified by the Ministry of Labour, Ministry of Long-Term Care, or other governing bodies.
- Emergency Code exercises and drills. For example, Code White (Aggressive Person), Code Red (Fire), Code Green (Evacuation) and Code Black (Bomb Threat).
- Completion and review of Workplace Violence Risk Assessment
- City of Hamilton Corporate and Lodge Policies, Procedures and Protocols such as:
  - Zero Tolerance of Abuse/ Neglect
  - Least Restraint
  - Code White-Aggressive Person
  - Harassment and Discrimination Prevention
  - Whistleblower Protection
  - Equity, Diversity, and Inclusion
  - Protocol for Gender Identity and Gender Expression
- Participation in the Healthcare Excellence Canada initiative to implement person centred care plan libraries to foster person-centred language, documentation, engagement, and care planning.
- Staff education and training related to Gentle Persuasive Approach and Positive Approaches to Care.
- Supporting staff to pursue education to support work related to reduction of workplace violence and health & safety such as Certification for Health and Safety through Public Services Health and Safety Association.

## Patient safety

Further Strategies to promote Resident Safety include but are not limited to:

- Implementation of Infection Prevention and Control policies and best practices
- Implementation of Medication Safety Technology initiatives per MLTC funding program:
  - PCC Module LTC eConnect to be implemented in future

- PCC Module Practitioner Engagement to be implemented in future
- Health teaching to residents and family members based on individual need, values and preferences upon admission and thereafter as needs change
- Implementation of Fixing Long Term Care Home Act, 2021 and Ontario Regulation 246/22
- Mandatory Vaccine Policy
- Visitor Policy
- Participation in CARF Accreditation voluntary survey
- Individualized High Risk and Falls Huddles
- Multidisciplinary care conferences and care team meetings
- Least Restraint Policy
- Secure doors to prevent residents from wandering (undetected) into stairwells, elevators, or outdoors during inclement weather (extreme heat or cold)
- CareRx Medication Management policies

Community Partners (see Resident Engagement and Partnering section for full list of community partners):

- Behavioural Supports Ontario
- Alzheimer Society
- Pain and Symptom Management Consultant
- Healthcare Excellence Canada
- Psychogeriatrician
- Public Services Health & Safety Association
- CUPE/ ONA Unions
- AdvantAge Ontario
- CARF
- Hamilton Public Health/ Hamilton Health Sciences
- CareRx Pharmacy

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- CARF
- Hamilton Public Health/ Hamilton Health Sciences
- CareRx Pharmacy

## Health equity

Wentworth Lodge has several strategies in place to help recognize, understand, and reduce disparities related to health outcomes, access, and diverse populations within our community of long-term care residents such as Indigenous Peoples, Black, racialized, and 2SLGBTQIA+ communities, Francophone, and high-priority populations. Some strategies have been in place for some time, while others are more recent. For example:

- A Cultural Competency and Diversity Plan is in place and reviewed annually. The plan addresses the needs of residents, personnel, and other stakeholders, and focuses on potential areas of disparities including Culture, Age, Gender, Sexual

Orientation, Spiritual Beliefs, Socioeconomic Status, Language and Race. Some strategies to raise awareness and reduce disparities in our resident population are described in the Cultural Competency Plan and include:

- o Culture/ Language:
  - Each year, information regarding staff languages is collected and used to support residents experiencing language barriers and language diversity
  - Special menus are offered and include culturally diverse themes such as French, Dutch, and Italian
- o Age:
  - Corporate Harassment and Discrimination Prevention Policy
  - Implementation/ adjustments to programs and services to support a younger population moving into long-term care
- o Gender:
  - Development of a framework for 2SLGBTQIA+ is embedded into the Wentworth Lodge Strategic/ Operational Plan
  - "Harassment and Discrimination Prevention" Corporate Policy
  - "Protocol for Gender Identity and Gender Expression" Corporate Policy
  - International Women's Day was recognized
- o Spiritual beliefs:
  - Services are available to support many denominations
  - Resources are available within the community to come into the home
- o Socioeconomic Status:
  - Rate reduction available annually
  - Support by Social Workers is available for residents to apply for assistance to pay for health devices
  - Community Volunteer Income Tax Prep Clinic
- o Race:
  - Black history month is recognized annually in February.
  - Resident race is captured during admission. This information is available to People Leaders and front-line staff for the purpose of building care plans based on resident needs, values, and preferences.
  - Residents are welcome and encouraged to participate in services or customary ceremonies inside and outside of the home that meet racial, cultural, and spiritual needs and preferences.

### Contact information/designated lead

Shelly Desgagne, Manager of Quality Improvement and Privacy  
Wentworth Lodge  
Phone: 905-546-2424 Ext. 5396  
Email: Shelly.Desgagne@hamilton.ca  
Web: www.hamilton.ca

### 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



Board Chair / Licensee or delegate \_\_\_\_\_ (signature)  
Administrator /Executive Director \_\_\_\_\_ (signature)  
Quality Committee Chair or delegate \_\_\_\_\_ (signature)  
Other leadership as appropriate \_\_\_\_\_ (signature)