

**Mount Hope Centre for Long Term Care  
Continuous Quality Improvement Initiative Report  
Fiscal Year End- March 31, 2023**

This Continuous Quality Improvement Initiative Report has been prepared as per the requirements outlined in the Fixing Long-Term Care Act, 2021 and O. Reg 246/22 Sec 168 (1). The below report highlights the key requirements and provides an overview on Mount Hope Centre for Long Term Care's approach to continuous quality improvement and will identify the priority areas for quality improvement, policies, procedures and protocols for the coming year.

**Mount Hope Centre for Long Term Care- Designated Lead Quality Improvement**

- Tanya Pol, Executive Director

**Quality Program Overview**

Mount Hope Centre for Long Term Care identifies its priority areas by conducting a thorough review of the annual results obtained from our Resident and Family/ Caregiver Experience Surveys. In addition to the feedback provided from our residents and care partners, we also examine the results of the annual program evaluations of our required and mandatory programs, along with services provided within the Home.

The Home gathers data monthly on a number of key indicators across the interdisciplinary team, to assist with "in the moment" data analysis in addition to the utilization review system and CIHI (Canadian Institute for Health Information) indicators that are released quarterly. The home works collaboratively with the Quality improvement Team, Resident Council, Family Council and interdisciplinary program teams to identify and develop areas for improvement.

**Annual Program Evaluations**

The process of our Annual Program Evaluations is to assist in the identification of gaps or areas for improvement and used as a vehicle to help facilitate changes within the home. The annual program evaluations are conducted to promote a collaborative approach among staff, residents and caregivers. The program evaluations are used as an improvement tool to highlight change ideas to assist the home not only in identifying areas of improvement but also prioritizing initiatives to provide quality care to the residents of Mount Hope Centre for Long Term Care. The Quality Improvement framework assists the team to report updates, review programs goals and objectives, review measures and outcomes, discuss quality issues and promote continuous quality improvement. The program evaluations results were shared at the Leadership Meeting on April 14, 2023 and at our Quality Committee meeting on April 18, 2023.

**April 1, 2023- March 31, 2024- Quality Improvement Priorities**

The Quality Improvement Plan (QIP) for the 2023/2024 year has identified the following priority areas to for improvement work which were shared and supported by the Quality Committee of Mount Hope:

1. Reduce the number of avoidable visits to the Emergency Department ***Timely and Efficient Transitions***
2. Reduce the number of residents on antipsychotic medications- ***Safe and Effective Care***
3. Improve rating on how well staff listen to you- ***Service Excellence***
4. Improve rating on "I can express my opinion without fear of consequences"- ***Service Excellence***

## **RESIDENT FAMILY/CAREGIVERS EXPERIENCE SURVEY**

### ***Resident Surveys***

The Mount Hope Resident Experience Survey was conducted in October 2022. Surveying for residents took place over a two-week period from October 11- October 25, 2022 and residents were given an opportunity to complete the survey with the assistance of an unbiased third party. The Home was pleased with the participation and received a total of 99 completed surveys by residents within the Home.

The resident experience survey outcomes were received by the home at the end of December 2022. Some preliminary survey results were shared at the Residents' Council meeting in February 2022 and the Executive Director was invited to present to the Residents' Council on May 18, 2023 during their regularly scheduled meeting.

Residents were offered the opportunity to have input into any area for improvement in addition to the two indicators included in our Quality Improvement Plan- Improve rating on how well staff listen to you and Improve rating on "I can express my opinion without fear of consequences. Residents' Council was supportive of the actions in place to improve the ratings for these two survey questions in addition to the goals for the 2023-2024 year.

### **Therapeutic Programs**

- More advertising and photos of events that are or have taken place.
- Will be exploring ways to enhance communication about what is occurring and when.

### **Food and Nutrition Services**

- Goal to create opportunities to provide a better dining experience for residents and staff
- Re-launch of Pleasurable Dining Committee and consider resident participation at these meetings.

### **Communication/ Engagement of Staff with Residents**

- Share "lived experiences" by residents with staff to create awareness of how residents feel.
- Encourage staff to put themselves in the shoes of the residents.

The home has been working collaboratively with the residents on the implementation of a designated smoking area to improve the satisfaction for residents who smoke as well as for families and visitors who come to Mount Hope.

A high-level summary of the satisfaction survey outcomes will be posted on the quality improvement boards within the Home and are accessible by residents, families and staff.

A summary of the Resident Survey results will be shared in the monthly staff newsletter for June 2023.

### ***Family Surveys***

The Mount Hope Family Experience Survey was conducted in November 2022. Families received notification of the upcoming survey through our family email distribution list sent out by the Executive Director. The families were provided access to a link to complete an on-line survey, with reminders occurring weekly. The survey link remained open from November 21- December 20, 2022.

The Home received a total of 95 completed surveys by family members within the Home. The family experience survey outcomes were received by the home during the month of February 2023.

The Executive Director was invited to present the family experience survey outcomes to the Family Council on May 10, 2023 during their regularly scheduled meeting.

Some areas requiring improvement identified in the survey results included:

1. Improve communication and follow up with families.
  - Communication system being implemented that will allow for quick phone updates and email.
  - New communication boards will be installed on all 10 home areas to include complaint process and home contacts.
2. Provide warm welcoming environment for all.
3. Stabilize staffing and continue to recruit and retain staff.
  - With increased hours through ministry funding recruitment is ongoing.
4. Continue to work on improvements to care conferences to ensure families and residents are involved and opportunity to participate.

Family Council was offered the opportunity to suggest other key areas to focus our work on for the 2023-2024 year.

A summary of the Family Survey results will be shared in the monthly staff newsletter for July 2023.

In addition to the highlights provided above, we are pleased to report that The Registered Nurses' Association of Ontario (RNAO) has selected Mount Hope Centre for Long Term Care to join its Best Practice Spotlight Organization (BPSO) program. Mount Hope is part of a cohort of 15 Ontario long term care homes that will be implementing evidence-based care under the program. This is a three-year commitment to enhance care and service using evidence based best practice guidelines (BPGs). The four clinical BPGs that the home will be implementing over the next three years include:

- Person/Family Centred Care
- Palliative Care
- End of Life Care Approaches
- Bladder and Bowel Management

Mount Hope Centre for Long Term Care remains committed to the core principles of continuous quality improvement and continue to work in collaboration with our stakeholders to improve the quality of care and services offered to those who have chosen Mount Hope as Home.