

2024/25 Quality Improvement Plan
"Improvement Targets and Initiatives"

Long Term Care



Niagara Health System 1200 Fourth Ave, St. Catharines, ON, L2S0A0

AIM	Measure									Change						Progress Report 2024-25		New Change Idea
Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization ID	Current performance	Target	Target Justification	External Collaborators	Planned Improvement Initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments	Was the Change Idea Implemented? Yes/No	Lessons Learned: What were the successes and/or challenges?		Insert New Change Idea(s) that were tested but not included in last year's QIP
M = Mandatory (all cells must be completed) P = Priority (complete ONLY the comments cell if you are not working on this indicator) A= Additional (do not select if you are not working on this indicator) C = Custom (add any other indicators you are working on). O = Optional																		
Equity - Equitable	Percentage of staff who have completed relevant equity, diversity, inclusion and anti-racism education	O	NH LTC Staff	Local data collection	S1585	Baseline - Apr/22 Dec/23 89.10%	Need 113 staff to complete the module assuming 133 active staff accounts	85.9% improvement to target 85%		1) Leadership engagement in San'yas Training All directors and managers are provided with San'yas Training through an online module training program.	# of leaders (managers, directors, supervisors, EVPs and President) completing the training	100% of all leaders in Niagara Health LTC complete training	San'yas training is an anti-racism Indigenous cultural safety training program.	YES	Successes: Leaders have completed the module. Challenges: None.			
						2) New hires engagement in Cultural Humility Training and Mutually Respectful Workplace and Diversity Training All new hires engage in cultural humility training at orientation and are to complete the Mutually Respectful Workplace and Diversity Training	# of new hires engaged in training	100% of new hires engaged in training		Successes: Embedding this training in a well-established and mandatory process (New Hire Orientation) enables us to achieve 100% compliance. Challenges: None.								
						3) Existing staff prompted to complete Mutually Respectful Workplace and Diversity Training Staff are provided with the Learnit module through the internal learning platform. Managers to follow up with staff to ensure the completion of these modules within the QIP year. Focus on supporting staff with time to complete the modules.	# of completed modules	85% of staff complete Learnit module		Successes: An online video was created so that the content for the modules could be viewed together as a group. Challenges: LTC has a lower compliance rate compared to across NH due to a more limited time available to be on a computer during shift.								
Experience	Do residents feel they can speak up without fear of consequences? Measured through "I can express my opinion without fear of consequences" Positive responses includes always or something and excludes never.	O	LTC residents	Patient Survey	S1585	Baseline - Apr/22 Dec/23 97.37%	Need 34 positive responses out of an assumed 38	Maintain 90%		1) Engagement with the Resident Council A resident council will be involved in reviewing the ratings of this measure from the survey and engaged in discussions on areas for improvement in a co-design process.	# of initiatives created and implemented as a result of the suggestions from the resident council	2 initiatives developed and implemented	YES	Successes: Working with the resident council allowed for insightful input in to the initiatives. Challenges: None.				
						2) Collaborative learning and training with community partners NH LTC will create learning opportunities for staff through partnering with community partners to discuss topics related to caring for individuals with various conditions, such as Alzheimer's and Dementia.	# of staff attending training, # of learning activities	85% of staff attending training, 2 collaborative learning opportunities		Successes: Monthly meetings occurring with Alzheimer's, Behavioral Supports Delta's, Connection, Dignity Therapist and Skin and Wound teams to support care for ECU patients. Challenges: None.								
						3) Collaborative Family Meetings 8 annual family meetings are implemented to provide a collaborative approach to understanding and addressing any issues or challenges experienced by the resident. This will help to close the loop with family and resident and any concerns.	# of meetings	100% of family/caregivers are engaged in one meeting per year		Challenges: Collaborating with family/caregivers to find a time for a meeting can be challenging. Despite LTC efforts, there is often minimal engagement with families/caregiver in these meetings. LTC will endeavor to find creative ways to engage patients and their families.								
Safety-Effective	Wounded Pressure Ulcer	O	LTC residents	CIRI reported data	S1585	Baseline - Oct/22 Sep/23 6.87%	Need 14 residents to be identified out of an assumed 291 volume	2.96% improvement to target 4.81%		1) Implementation of a skin and wound module through Point-Click Care The Point Click Care Skin and Wound Program allows for the measurement of wounds and supports leading practice for treatment. This will be used on all wounds moving forward.	# of staff trained on the software, # of wounds assessed and treated through the skin and wound program; reduction in the number and severity of the wound	100% of staff trained on the software; 100% of wounds on the unit logged and managed through the new software; 50% reduction in severity of wound	YES	Successes: Implementation of training completed and use of module to assess wounds is going very well. Challenges: Temporary downtime on the module, therefore the teams had to revert to paper documentation. This created some data collection challenges and increased requirement to collect baseline data on certain wounds.				
						2) Implementation of a Skin and Wound Committee The Skin and Wound Committee will be a multi-disciplinary team of health professionals dedicated to advancing skin and wound care. This team will meet monthly to review data, align staff education to current needs, review new products, collaborate with expertise and create decision making tools for clinicians.	# of meetings; # of resulting initiatives	12 meetings; 5 initiatives implemented	YES	Successes: Monthly meetings continue and improvements to the use of the app continue on the unit. The Skin and Wound ECU Rep is now part of the NH Pressure Injury Steering Committee to discuss innovations in the ECU. Challenges: Staff attendance at meetings due to outbreaks created a challenge in scheduled meeting. To mitigate the meeting agenda and minutes were circulated and follow ups occurred.								