

Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

March 28, 2024

## OVERVIEW

Kipling Acres is operated by City of Toronto, Seniors Services and Long-Term Care (SSLTC), Accredited by Accreditation Canada with Exemplary Standing. The team at Kipling Acres is dedicated to continuously improving the care and services provided. The quality improvement plan (QIP) for 2024/25 reflects our commitment to enhancing equity, improving resident and family experience, fostering innovation, integrating palliative care and aligning with external partners to improve care outcomes.

The quality improvement plan is aligned with our strategic priorities:

- Excellence in Care & Services
- Integrated Care & Service Continuum
- Thriving Workforce

This QIP was developed in consultation with Residents' Council, Family Council, SSLTC leadership, and aligns to Ontario Health priorities.

Kipling Acres will focus on improving:

- Rates of potentially avoidable Emergency Department visits
- Rates of residents prescribed anti-psychotic medications, without a diagnosis of psychosis.
- Percentage of LTC residents who fell in the 30 days leading up to their assessment.

Equity, diversity and inclusion knowledge section the home will focus on:

- Improvement of knowledge relevant to equity, diversity, inclusion, and anti-racism

#### Resident/Client Experience section

Overall, resident and family satisfaction, as measured in annual Your Opinion Counts survey, is high:

- 93% long-term care residents' families are satisfied with care and services
- 92% long-term care residents are satisfied with care and services

However, we have identified the following areas for improvement and will utilize a variety of quality improvement methods to ensure there are a variety of avenues for:

- Residents and family members to communicate openly and freely regarding care and service needs.

Kipling Acres was also recently designation 17 Behavioural Support Unit(BSU) beds by the Ministry Long-Term Care, the home will open the new BSU in the spring of 2024. This will help to support access and flow for hard-to-place residents with moderate to severe responsive behaviours.

In addition to these indicators, the home will continue to monitor various outcomes including both clinical and non-clinical areas. This will assist us in implementing new change ideas through quality improvement processes, structures, and partnerships to sustain high quality of care and services.

## ACCESS AND FLOW

Appropriate, safe, effective flow and access to essential care resources, is necessary to improve resident outcomes and reduce emergency room utilization. Kipling Acres is implementing strategies that will positively impact the health and wellness of residents while improving the effective utilization of acute care resources particularly emergency room.

Care pathways, in-home resources, partnerships, and education are key strategies to improve flow and access to appropriate care. The following strategies will be a focus of 2024/25:

- Implement palliative and end-of-life care to support families and staff caring for residents through their continuum of care journey.
- Staff education and implementation of new early identification assessments to monitor changes in LTC residents' health status.
- Purchase specialized equipment and training to support staff in providing safe and timely care.
- Utilization of community-resourced nurse-led outreach teams to support LTC staff training and access to time-sensitive clinical supports to help reduce avoidable emergency department transfers.
- Accessing LTC+ program that provides direct access to a suite of services including general internal medicine, specialist care and community resources.
- Fully implementing Amplifi a seamless communication platform that facilitates the exchange of LTC resident information between caregiver, long-term care home and hospital.

- Nurse Practitioners as part of the interprofessional team to address complex and acuity care needs, through assessment, care planning, and ongoing monitoring of disease progression.
- Toronto Public Health Dental program to support seniors access dental screening, treatment on site and funding for eligible residents.
- Opening a new BSU to help reduce the alternate level of care patients in hospitals by admitting hard-to place LTC applicants with responsive behaviours and then transitioning them to a regular long-term care bed.

The above strategies are intended to improve access to care in the most appropriate location.

## EQUITY AND INDIGENOUS HEALTH

The City of Toronto and SSLTC embed Equity, Diversity, and Inclusion (EDI) goals within workplace culture. Each manager has EDI goals as part of their annual workplan and no matter their role, are all working together to ensure diverse communities and groups are valued, recognized, consulted and that we recognize the barriers of discrimination and disadvantage within the spaces where we live, work and visit.

We have identified priorities:

### Reconciliation with Indigenous People

- As part of Orange Shirt Day and the National Day for Truth and Reconciliation, staff members were part of an inter-divisional book club with colleagues in Children's Services and Parks, Forestry & Recreation.

Author Michelle Good, met with us to discuss her book, Five Little Indians, and the history and legacy of residential and day schools, as our team expands educational programs and initiatives, and deepens an understanding of contemporary urban Indigenous residents, clients, colleagues, and neighbours.

### Confronting Anti-Black Racism in the Workplace

- SSLTC's Three-Year Action Plan to Confront Anti-Black Racism (CABR) in the Workplace outlines a path forward for senior leadership, management, and staff to foster a more inclusive and equitable workplace where anti-Black racism does not exist.
  - CABR Site and Divisional Steering Committee
  - Black History Month events and celebrations
  - Get to Know Me Black Staff Storytelling initiative.

### Further Leading & Learning with Pride for 2SLGBTQI+ Seniors

- Lived-experience lead discussions with stakeholders related to 2SLGBTQI+ discrimination is enhancing ongoing learning and helping to shape new training tools to address homophobia, biphobia, and transphobia and promote inclusion throughout operations and programs.
- Frontline staff education and training of the SSLTC Leading & Learning with Pride Tool Kit resource.
- Sharing and discussing Tool Kit with physicians and nurse practitioners during the Ontario Long-Term Care Clinicians Annual Conference, as a best practice for respectful, inclusive, and affirming care with and for 2SLGBTQI+ seniors.

## PATIENT/CLIENT/RESIDENT EXPERIENCE

Although there are many challenges being faced within long-term care, particularly staffing shortages, there are also opportunities to engage with partners, create advancement in care practices, innovate staffing models, introduce specialized care practices and provide dignity at end of life.

SSLTC continues to reflect on the challenges and the changes in resident demographics, healthcare needs, with a keen focus of aligning resources to meet individual residents' goals of care. The landscape of long-term care population continues to evolve with admission of younger adults, seniors with multiple comorbidities, and shorter lengths of stay.

The impact of staffing shortages is significant, and reflective of areas for improvement shared in this report. And although there are challenges, residents and their families acknowledge and appreciate the quality, professionalism and compassion demonstrated by staff in caring for their loved ones, as shared in the annual Your Opinion Counts (YOC) survey.

The 2023 YOC survey results clearly show the opportunity to improve responsiveness and communication in the home. The home will work very closely with Residents' Council to determine the specific areas where communication and responsiveness requires improvement. As specific areas are identified, a plan will be developed to address them. The home will also be arranging a customer service session for staff and managers to remind them about the City and SSLTC's customer service expectations.

We continue to foster an environment of inclusion, equity, collaboration, innovation, and knowledge transfer which is key to enhancing resident experience, prioritizing the health, safety and well-being of residents and for the staff members who diligently care for and support the residents.

## PROVIDER EXPERIENCE

Similar to other long-term care homes, we face staffing shortages and hiring challenges. A thriving workforce is one of three strategic plan priorities. The recent creation of a Workforce Management team has enabled increased collaboration and strengthened focus on several facets of human resources – recruitment and workforce administration, employee and labour relations, health & safety, organizational development and equity, diversity and inclusion. This new structure and capacity supports long-term care operations under one portfolio.

While the recruitment process is under the oversight of the broader City of Toronto corporate structure, the Seniors Services and Long-Term Care division now has a dedicated recruitment team to support the steps within the recruitment process. This additional capacity and dedicated resources focus on filling position vacancies, with emphasis on frontline positions.

Vacancies continue to increase year over year through allocation of an enhanced budget as we move towards meeting the Ministry standards of an average of 4 hours of care, per resident, per day by March 2025.

We continue to make strides in having positions in place with specialized knowledge, skills and experience, to effectively provide care and services to residents, based on emerging and evolving needs. New positions such as the IPAC Manager (Infection, Prevention Control), Nurse Practitioners, and a Social Work Practice Lead are examples of these types of new positions implemented in the division.

Soliciting feedback from staff enables greater understanding of the staff experience. Analysis is currently underway for two key surveys recently undertaken. An Employee Engagement Survey solicited feedback with respect to critical factors that influence overall staff engagement such as communications, learning and development and wellness.

The second survey is specific to Confronting Anti-Black Racism (CABR) in the Workplace and input shared by staff will help to identify progress made since the first survey and to develop current understanding of staff experiences with anti-Black racism in the workplace. Responses from the survey will also support the implementation of the division's CABR action plan which is positioned to improve the experience of all staff members.

All of this work contributes to our most important resource - having a productive, motivated and thriving workforce.

## **SAFETY**

Kipling Acres continues to promote a culture and environment of safety for residents through the development of resident safety plans linked to outcomes, accreditation standards and leading practices. Teams regularly review incidents, identify safety concerns and recommend changes.

Quality of Care Information Protection, 2016 (QCIPA) reviews will be a key focus in 2024 to support learnings and prevent reoccurrence of critical incidents. Like many healthcare organizations staffing challenges, and influx of new hires, has elevated the prominence of resident safety. Reducing critical incidents, the potential of reoccurrence, increase transparency and creating a safety culture are key objectives. We are committed to promoting a culture and environment of safety which encompasses emotional, physical, and psychological wellbeing.

The home has done a lot of work in ensuring resident safety, specifically, with the focus on reducing the inappropriate use of antipsychotics and reducing resident falls. Tracking, monitoring and timely follow-up with the doctor and psychiatrist have been helpful in reducing inappropriate use of antipsychotics. For 2023/24, the BSO team will focus on enhancing the use of non-pharmacological interventions including Gentle Persuasive Approaches.

## **POPULATION HEALTH APPROACH**

Residents and clients represent an increasingly diverse range of spoken languages, cultures, food preferences, faiths, sexual orientations, gender identities and expression. At Kipling Acres, we provide 337 long-term care beds.

Our home provides care to residents with the following healthcare major disease categories:

- Hypertension
- Dementia
- Hyperlipidemia
- Type 2 diabetes mellitus
- Osteoporosis

Residents are typically entering the home with advanced stages of physical and cognitive decline.

The resident's population consist of approximately 66% women and 33% males, and this trend has been consistent for a few years. While the residents' ages range from 32 years old to over 100 years old, 69% are over the age of 80 while 5% are 60 years or under.

Just like the broader society, Kipling Acres residents come from a diverse background, speak several different languages, and observe different religions. However, more that two-thirds of the resident population still speak English as their primary language and are from the Christian faith. As long-term care continues to admit residents from diverse background, although it adds to the complexity of operating a long-term care home in meeting the diverse needs, it also adds to the richness and experience of living in long-term care.

#### Resident Profile %

% of residents that have moderate to very severe cognitive impairment 65%

% of residents that have dementia 63%

% of residents that exhibit aggressive behaviour symptoms 28%\

% of residents that are dependent or require extensive assistance with ADLs 71%

% of residents that use mobility devices 77%

% of residents that are dependent or require extensive assistance with meals 47%

We believe we have a responsibility to design our approaches, programs and environments in a manner that supports residents' rights to dignity, self-esteem, independence, and ensures delivery of care and services that is enriched by partnerships with families, staff, volunteers, healthcare partners and the community.

#### **CONTACT INFORMATION/DESIGNATED LEAD**

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## 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 on March 28, 2024

Jennifer Dockery

**Jennifer Dockery**, Board Chair / Licensee or delegate

Bambo Oluwadimu

**Bambo Oluwadimu**, Administrator /Executive Director

Dr. Karen Cronin

**Dr. Karen Cronin**, Medical Director, Co-Chair - Quality Committee

Elizabeth Juraschka

**Elizabeth Juraschka**, Quality Committee Chair or delegate

Soo Ching Kikuta

**Soo Ching Kikuta**, Director, Resident Care & Services