Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 23, 2025





NARRATIVE QIP 2025/26

OVERVIEW

Fudger House is operated by the City of Toronto, Seniors Services and Long-Term Care (SSLTC), Accredited with Exemplary Standing by Accreditation Canada. The team at Fudger House is dedicated to continuously improving the care and services provided. The quality improvement plan (QIP) for 2025/26 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 division's strategic priorities provide a framework and direction for quality improvement efforts and by aligning to key initiatives, the LTC home can foster a culture of continuous improvement and accountability.

Excellence in Care & Service

- Pursue continuous quality improvement to enhance resident and client-centered outcomes, adapt to regulatory changes, evolve and respond to clinical complexity and adherence to best practices
- Enhance resident and staff experiences through CareTO culture change

Fudger House QIP was developed in consultation with the Residents' Council, Family Council, and SSLTC leadership and aligns with Ontario Health priorities. Fudger House will focus on:

- Advancing percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and antiracism education
- Improving resident experience outcomes
- Sustaining reductions in residents prescribed anti-psychotic medications, without a diagnosis of psychosis

- Sustaining rates of potentially avoidable Emergency Department visits
- Sustaining percentage of LTC residents who fell in the 30 days leading up to their assessment

In addition to these indicators, the LTC home will continue to monitor various outcomes in both clinical and non-clinical areas.

ACCESS AND FLOW

Appropriate, safe, effective flow and access to essential care resources, is necessary to improve resident outcomes and reduce emergency room utilization. Several strategies have been implemented to enhance in-home medical care, such as expanding scope of practice provided by registered staff and access to healthcare professionals like nurse practitioners to effectively manage chronic conditions. Implementing comprehensive staff training on early identification of health issues and providing residents with preventative care interventions including vaccination has also improved resident care outcomes. Strengthening communication and core coordination with external healthcare providers has improved treatment and reduced unnecessary hospital visits.

Fudger House 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 2025/26:

- Implement palliative and end-of-life care to support families and staff caring for residents through their continuum of care journey.
- Provide staff education and implementation of new early identification assessments to monitor changes in LTC residents' health status.
- 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.
- To have goals of care conversations to support families and enhance quality of life decisions.
- Recruit, train, develop, and retain interprofessional team members to better support the resident and thereby reduce emergency room visits.

EQUITY AND INDIGENOUS HEALTH

Seniors Services and Long-Term Care (SSLTC) has developed key objectives to strategically advance health equity for the Indigenous community, with a goal to improve access to long-term care. Equity in healthcare for Indigenous seniors is a crucial issue as it encompasses the right to access healthcare services and respect cultural values and meet unique needs. Historical and systemic barriers have led to disparities in healthcare outcomes for Indigenous elders who often face higher rates of chronic disease and mental health challenges. Ensuring equity involves improving accessibility to culturally competent care, enhancing communication between healthcare providers and Indigenous communities, and integrating traditional healing practices with conventional medical treatments.

SSLTC has developed resources and educational sessions to broaden cultural understanding and knowledge of inequities and injustices that Indigenous people face. Collaborative approaches in policies that prioritize Indigenous voices and knowledge are essential in bridging these gaps and in promoting holistic health for Indigenous seniors.

We have established a workplan to address inequities that includes:

Reconciliation Action Plan

Relationship-building is the first step in fulfilling SSLTC's
responsibilities in the City of Toronto Reconciliation Action
Plan. Reconciliation is about establishing and maintaining
mutually respectful relationships between Indigenous and
non-Indigenous People, with an awareness of the past,
acknowledgement of and atonement for the harms that have
been caused, and actions to change behaviour.

o SSLTC is supporting engagement with Anishnawbe Health, Indigenous health and social service provider to determine the feasibility of developing Indigenous-specific long-term care for Toronto elders.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Seniors Services and Long-Term Care (SSLTC) prioritizes creating a positive and enriching resident experience by focusing on both the physical environment and the emotional well-being of those we serve. We foster a welcoming safe and supportive atmosphere where residents feel valued and part of a vibrant home. Though we face staffing challenges, our staff make every effort to address needs promptly and with a personal touch ensuring that each

resident's unique needs and preferences are respected.

Our goal continues to be making residents feel comfortable, cared for and truly supported.

Improving the Resident Experience is supported by key strategies including:

- Residents' Council is promoted for participation and election of executive members to advocate for and make improvements within the LTC home
- Representatives from all 10 City LTC homes gather for annual Residents' Summit to network, provide input to policies, receive education such as fraud prevention targeting seniors, and review resident menu items
- Your Opinion Counts resident survey is administered on-line, inperson, and translated as required to increase participation rates

Your Opinion Counts Experience Survey

Overall, resident and family experience is positive, as measured in annual Your Opinion Counts survey:

- 100% long-term care residents' families are satisfied with care and services
- 93% long-term care residents are satisfied with care and services

However, we have identified these areas for improvement and will collaborate with residents to ensure that:

- Residents feel that their issues, concerns or request for information are addressed
- Residents feel that their belongings are treated with respect
- Residents feel that personal laundry services meets their need

PROVIDER EXPERIENCE

SSLTC is committed to supporting the overall health and well-being of all staff in its long-term care homes. We recognize that the work can be demanding and we take seriously any concerns brought forward by City staff. We have created space to actively engage long-term care workers within each long-term care home and have made meaningful improvements for staff as well the more than 2,600 people living in City-operated long-term care homes, both proactively and because of staff feedback.

Long-term care homes face significant challenges in hiring staff including high turnover rates due to burnout and wages, leading to understaffing. The aging population is increasing the demand for services, but the workforce is insufficiently expanding, with multiple demands across the healthcare sector, also impacting on staff availability. The reliance on temporary staff does impact the ability to have consistency in staffing, continuity of care and leads to higher costs.

In 2024, City LTC homes averaged 3.14 direct hours of nursing care, as a result of initiatives to accelerate hiring, this number will continue to increase in the coming months as we work toward meeting the provincially funded and mandated average of 4 hours of care per resident, per day.

Wellbeing and retention programs will continue to expand and focus on workplace wellness committees, caregiver well-being supports, and initiatives including mental health workplace training (The Working Mind) mindfulness guides and the "It's okay not to be ok" campaign to avoid burnout.

SAFETY

Fudger House promotes a safe environment including emotional, physical and psychological wellbeing. Resident safety plans are developed, linked to outcomes, accreditation standards and leading practices. Teams regularly review incidents, identify safety concerns, and recommend changes.

A key safety focus in 2025/26 will utilize Quality of Care Information Protection (QCIPA) reviews to support staff learning and critical incident reoccurrence prevention.

As recognized leaders in behavioural support programs, we have a long history of demonstrated knowledge of dementia, delirium and mental health in the delivery of care.

Staff and medical professionals are knowledgeable in the most prevalent types and related causes of behavioural issues, understand disease processes, stages and progression, diagnostic and assessment process, cognitive or neurological symptoms, treatment interventions, appropriate communication to address resident needs, strategies to promote optimal quality of life and experience of the behaviour(s) from the perspective of the resident, family members and other partners in care.

PALLIATIVE CARE

The Seniors Services and Long-Term Care (SSLTC) palliative and end of life care program is a holistic approach, offering long-term care residents specialized care and services that are resident-centred, compassionate, and coordinated, with a focus on managing and supporting the needs of residents who are facing a serious, life-limiting illness.

We are committed to continuously enhancing the quality of our palliative care. Currently, we are updating the program to incorporate evidence-based tools that support the early identification of residents who would benefit from a palliative approach. This spring, we will launch an updated Palliative & End-of-Life Care Program, requiring interprofessional care teams to use the Gold Standards Framework 3-Step Best Practice Model. This framework ensures a comprehensive, holistic assessment of residents' needs across multiple care domains, including disease management, physical, psychological, emotional, social, spiritual, practical, grief, and cultural considerations.

Additionally, we are strengthening our healthcare providers' capacity and confidence in communicating about palliative care with residents and their loved ones. To support this, we are implementing key resources such as the Admission Care Conference Letter, which introduces residents and/or their substitute decision-makers to a palliative approach to care, a Palliative & End-of-Life Information Sheet and other supportive tools.

POPULATION HEALTH MANAGEMENT

We recognize the significant policy, service, and resource implications of Toronto's growing senior population. This

demographic shift comes with anticipated population health impacts. Poorer health outcomes among low-income older adults, increased difficulty accessing health and social services, effects of social isolation and loneliness and health impacts related to changing environments are expected. However, the health of older adults can be positively affected by protective behaviours, such as increased physical activity and socialization.

Fudger House residents' present themselves with the following:

70% of residents that have moderate to very severe cognitive impairment

56% of residents that have dementia

39% of residents that exhibit aggressive behaviour symptoms 92% of residents that are dependent or require extensive assistance with the activities of daily living

87% of residents that use mobility devices

43% of residents that are dependent or require extensive assistance with meals

To prepare for this change, City partners, including SSLTC and Toronto Public Health are working with community partners, as part of the Toronto Seniors' Strategy and identifying and implementing interventions to enhance the social, natural and built environments that promote and protect the health of a growing population of older adults.

SSLTC is leading the development of the third Toronto Seniors' Strategy to better support aging in place, particularly for seniors who are Indigenous, Black, and who belong to equity-deserving groups. A robust community consultation process to enhance the City's understanding of the priorities of seniors and older adults is underway.

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 26, 2025.

Nicole Welch

Nicole Welch, General Manager / Licensee or delegate

Lesreen Bennett

Lesreen Bennett, Administrator and Chair Site CQI Committee

Dr. Jean Robinson

Dr. Jean Robinson, Medical Director and Co-Chair Site CQI Committee

Donna Lee

Donna Lee, Director, Resident Care and Services

Tizabeth Juraschka

Elizabeth Juraschka, Quality Improvement Advisor, Divisional Quality Council