Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 29, 2025

Ontario Health

OVERVIEW

Anson Place Care Centre is a 47-bed Long Term Care home located in Haldimand County, nestled in the small town of Hagersville Ontario. Located in the heart of Hagersville, our residents and their families have access to shopping at local business, restaurants and pharmacies. Many of our residents enjoy services provided by the Haldimand County Public Library.

Anson Place Care Centre is proud to be Accredited by Accreditation Canada. The home had an accreditation survey in 2021 and received a 4 year award. Our success demonstrates that we meet standards and are committed to continuous improvement. Our Quality improvement strategies don't stop here; we take every opportunity to access funding resources that can positively impact the quality of life of the residents who reside at Anson. In 2022 our home received a grant from HealthCare Excellence Canada (HEC) for training from UK-based Meaningful Care Matters Ltd (MCM). Our home utilizes the QUIS novel approach in Canadian Long-Term Care, to target, measure and improve the quality of interactions between team members and residents. Through this approach team members receive the tools to engage in moments, experiences and activities that resonate with residents - all with the intent of improving resident quality of life.

Our Vision is to create communities of trust and fulfillment for our team members and residents. Quality improvement is the foundation of our home as it contributes to our core values of; Kindness, Progressive, Integrity and Community. Our home has an established Interdisciplinary Quality Improvement Committee that oversees all aspects of our Continuous Quality Improvement (CQI) Program and initiatives. The Committee identifies change ideas that

are implemented in collaboration with the interdisciplinary team. The Quality Improvement Committee Meets Quarterly to monitor key indicators and seeks feedback from stakeholders including residents and families. Through regular meetings, data review and analysis, the home can confirm whether the changes result in improvement or make adjustments as required to promote continuous improvement and the best quality of care and services offered. The selection of the QIP Priorities was selected by the Interdisciplinary Quality Improvement Committee. The QIP priorities were selected in alignment of our reportable indicators to address gaps identified during annual program evaluations.

ACCESS AND FLOW

Long-term care is a supportive environment designed to meet the needs of individuals with complex chronic conditions who require assistance with daily activities.Our home supports informed decision making when considering a transfer to the emergency department. Decisions made by families and residents are often influenced by feelings of urgency and fear. Creating a safe, supportive, and caring environment is essential to ensuring the success of this program and providing comfort during challenging times.

In 2025 Anson Place has committed to working towards achieving a certification in Excellence standing in the Ontario Prevention of Error-Based Transfers program (PoET Program). PoET is a training and certification program assisting long-term care homes' practice and alignment with Ontario's Health Care Consent Act, supporting the avoidance of unnecessary or unwanted transfers to acute care and meets requirements under the Fixing Long-Term Care Homes Act.

Our home recognizes that in order to continue to optimize system capacity by avoiding unnecessary hospitalization or emergency department visits we need to partner with external organizations to support residents in accessing the right care in the right place and the right time. In 2025 Anson Place will be partnering with Nurse Led Outreach Team (NLOT) in collaboration with the Norfolk General Hospital. The nurse led outreach team provides urgent mobile nursing services in Haldimand/ Norfolk Long Term Care homes. The NLOT provides direct comprehensive primary care, acute episodic, palliative and end of life care. The NLOT provides education and clinical support to build staff capacity to manage complex procedures and resident health conditions. The goal of the NLOT program is to facilitate reparation from hospital and reduce the length of stay and to reduce the avoidable emergency transfers through nurse practitioner consultation for acute episodic conditions. This program will allow us to provide residents the care they need in the location they prefer to be in.

To further support the optimization of system capacity in 2025 Anson Place will be implementing Point-of-Care testing for whole blood analysis, urinalysis and PCR testing.Our goal in enhancing our Point of Care Testing capacity is to provide faster analysis results for our residents, enabling timely care and treatment within the home and reducing the need for transfers to the emergency department.

As our home is located in a rural area the availability of accessible transportation and services for our residents is limited. In addition to our in house services such as; 24 hour nursing care, weekly physician visits, laundry services, nursing restorative care and

recreational activities. Our home actively seeks out external partners that are able to provide their services in house to increase resident access to essential care. Anson Place has contributed partnership with, Physiotherapy, Nursing Foot Care Services, Social Work Services, Dental Care, Massage Therapy, Pharmacy Services and Laboratory services.

EQUITY AND INDIGENOUS HEALTH

Anson Place Care Centre values the diverse needs of the residents who reside in our home. When residents move into our community, our team takes the time to understand their cultural background, values, traditions, preferences, and beliefs, ensuring we respect and accommodate what matters most to them.

Utilizing the demographic information collected from our residents our home hosts events and social programming that recognizes our residents cultures and religious practices. Anson Place partners with external groups such as the Caledonia Anglican Church to provide culturally specific spiritual programming and foster connections within the greater community.

At Anson Place, We are an equal opportunity employer, dedicated to creating a diverse and inclusive environment where all individuals are respected and given the opportunity to thrive, regardless of their background or identity. Anson Place has policies in place such as the; Discrimination and Harassment Policy that protects all residents, staff and visitors that enter our home. All of our team members at Anson are trained on Diversity, Equity and Inclusion at their orientation period and annually.

Anson Place seeks out opportunities for ongoing enhanced education on equity, diversity and inclusion. In 2024 our homes Executive Director attended education provided by Ontario Health on First Nations Inuit and Metis Culture Colonization and the Determinants of Health. The knowledge gained during the education was disseminated to the team. Anson acknowledges that the residents and team members live and work on the traditional territory of the Anishinaabeg, Hodinoshyo:ni, and Attawandaran (Neutral) peoples which is situated on the Haldimand Tract, the land granted to the Six Nations that includes 10 kilometers on each side of the Grand River.

As we look to the coming year, we will focus on strengthening and nurturing our equity and anti-racism competencies within our home.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Our residents are the driving force of our quality improvement initiatives. We actively encourage and support the involvement of all our residents in decisions related to their care, activities, and environment.The Residents Council at Anson Place provides a forum for residents to meet monthly to discuss topics of importance. The Residents Council plays a key role in the quality improvement program within our home. All proposed and current quality improvement activities are reviewed with the homes Residents Council and documented in their meeting minutes.

Opinions and feedback from our stakeholders enrich our home and the living experiences of those who enter. Annually our home facilitates a Resident Satisfaction Survey to collect feedback on the lived experiences of our residents. The results of our resident satisfaction surveys influence the actions taken in our quality

improvement plans.

The questions implemented on the resident satisfaction surveys were reviewed with the residents at their monthly Residents Council meeting on September 4th 2024.The resident satisfaction survey was implemented to the residents between September 9th - September 27th 2024. On December 3rd 2024 the results of the resident satisfaction survey results were reviewed with the Residents Council. Utilizing the feedback from the results of the survey and the Residents Council our home got to work in developing an action plan to address areas of improvement.

The action plan developed was based on the results of the 2024 resident satisfaction survey, specifically targeting the item with the lowest favorability; "I have enjoyable things to do in the evenings and on weekends". It is our homes goal to increase this indicator from 74% in 2024 to 76% in 2025. Action items that have already been completed are; the implementation an individualized resident survey to determine what the residents would like to do on the evenings and weekends and what time they would like the programs. The survey was completed by January 31st 2025. Using the results of the survey an additional action item was developed; to facilitate themed special event programming on the activities calendar 1 evening (after 4pm) and 1 weekend per month from March 2025 - December 2025. We initiated a daily calendar that is posted in both dining rooms and the nurses station to communicate to both residents and staff what programs are occurring each day (including evenings and weekends) posting began on January 31st 2025. The daily activity calendar is in addition to the monthly activity calendar that is provided to all residents and their families via the weekly updates.

At present, our home does not have an established Family Council because there has been limited interest from our families. Our home greatly values feedback from family members, and to keep them informed, we prioritize maintaining a strong communication channel. Each week, our Executive Director sends out an update to residents and their families, highlighting the key activities taking place within the home. The 2024 resident satisfaction survey results were shared with families via email on March 7th 2025 including an update regarding the change ideas that have already been actioned.

Our Home has partnered with Meaningful Care Matters since 2022, adopting the QUIS novel approach in Canadian Long-Term Care. The QUIS approach allows us to measure the quality of interactions between team members and residents. We continue to recognize, name and quantify controlling interactions, those that are neutral (task-focused) and those that are truly meaningful. Each month our home completes 4 hours of QUIS observation, the results of the observations are discussed at respective meetings within the home such as; Residents Council, Staff Town Hall and departmental team meetings. The sharing of this information helps improve our residents' experience.

PROVIDER EXPERIENCE

At Anson Place we aim to foster an environment where team members feel valued, heard, and know that they’ve made a meaningful impact. Annually home implements an Employee Engagement Survey to receive feedback from our care providers. The results of the 2024 Employee Engagement Survey was reviewed with our team members at the Staff Town Hall meeting on February

13th 2025. The Staff Town Hall meetings was facilitated 3 times (once on every shift) at 6:00am, 10:00am and 2:30pm.

The Leadership Team analyzes the results of the survey to identify opportunities for improvement. Goals and Action plans are developed to target the opportunities for improvement. The Employee Engagement survey implemented in 2024 identified that our home needed to take action in the indicator; "to ensure team members feel recognized on an individual basis,". Our goal is to increase this indicator from 47% in 2024 to 55% in 2025. To achieve this goal our team has initiated an action plan that is also included in the homes 2025 Operational Plan under - High Performance Teams. The first Change idea; the leadership team will survey team members at the respective monthly departmental meetings (Nursing, Dietary, Environmental and Programs), to identify what "being recognized means to them" by February 28th. The survey was implemented by February 28th 2025 as evidenced in the departmental meeting minutes. The second change idea is; The leadership team will review survey results and develop recognition strategies based on the top 3 most common gaps identified by April 1st, 2025. The leadership team met on February 4th 2025 to analyze the results of the secondary survey that was completed. The top 3 most common gaps in terms of recognition was; increasing informal recognition, monetary recognition identified as a "tangible or monetary incentives and celebrating significant achievements and milestones. On March 4th our home celebrated our employees that have achieved years of service milestones in 2022, 2023 and 2024. The celebration was implemented successfully and well attended by staff. Our leadership team is in the process of developing action plans to address informal recognition and monetary recognition among our team members by April 1st 2025.

At our Home, providing our team members opportunities for professional growth and development is a top priority. When our team members express interest in areas such as; skin and wound care, infection prevention and control, or non-pharmacological interventions, we actively support their passion by seeking out relevant opportunities for learning and development. We are committed to enrolling our team in programs that help them grow and excel in these fields.
In 2024 our team members attended: Gentle Persuasive approaches and Collaborative Palliative Approach to Care. In 2025 we have enrolled team members in attending; U First Dementia Training, Wounds Canada Education, Horticultural Therapy Education and Aromatherapy Education. We believe that by involving our team members in education that aligns with their interests, they become more engaged in the care they provide to our residents. This, in turn, enhances their job satisfaction and overall fulfillment in their work.

In 2024 members of the Leadership team participated in LEAN education from Leading Edge Group. Lean training provides education on how to improve operational efficiency by reviewing and applying lean principles and tools such as; value stream mapping, waste elimination and continuous improvement. Our homes' Business office Manager, Recreation Manager, Executive Director and Director of Care were successful in achieving Lean Certification in the Yellow Belt Program. Our Homes' Quality Improvement Coordinator was Successful in achieving Lean Certification in the Green Belt Program. LEAN training enhances our homes' leaders ability to be involved in and lead continuous quality

improvement initiatives within the home.

Anson Place provides all of our team members with access to our Employee and Family Assistance Program (EFAP) called Dialogue. Dialogue is the leading Canadian virtual care platform offering a portfolio of health and wellness services to keep our team members and their families happy and healthy. Dialogue is a virtual service via a mobile or web-based application accessible anywhere in Canada offering consultations with a variety of professionals. The services offered to our team members through Dialogue include; mental health, family and relationship, child and eldercare, work and career, legal, financial, and manager consultation. Dialogue is promoted on our homes Wellness Board and information is distributed to our newly hired team members at orientation.

SAFETY

Ensuring the safety of our residents and our team members is a priority of our home. Through continuous quality improvement and risk management we seek to achieve safe and desirable outcomes for our staff and residents. Our Home has several interdisciplinary programs in place that work together to achieve these outcomes.

Our homes Falls Prevention Committee works closely with our Physiotherapist and the Restorative Care Team to ensure falls prevention and injury prevention interventions are appropriate and individualized to our residents. Through physiotherapy and restorative nursing approaches, we focus on preserving our residents' physical abilities, helping them maintain their independence. These methods support them in staying as active and self-sufficient as possible, promoting overall well-being, quality of life and prevention of falls. Our homes Falls Prevention Committee closely monitors our has fallen in 30 days of assessment indicator. To proactively prevent falls in real time the Falls Prevention Committee conducts a root cause analysis (5 Whys Lean Template) to determine the primary source of the falls. Through fully analyzing and understanding why falls are occurring our team is better equipped to prevent them.

To support residents that are exhibiting expressive behaviours our home works in collaboration with Behaviour Support Ontario (BSO). Behaviour Support Ontario is one of our External Partners that works with our residents on a referral basis to provide transitional and episodic support. The interdisciplinary Expressive Behaviours Committee works closely with BSO and our homes' physician to make recommendations and trial non-pharmacological approaches to care to support our residents experiencing expressive behaviours. Understanding our residents' triggers and the care approaches that work best for them ensures a safer and more positive experience for both the residents and our team members. This knowledge allows us to provide personalized care, reduce potential risks, and create a supportive environment for everyone involved.

Our Homes' Interdisciplinary Medication Management Committee reviews and analyzes all medication incidents to identify root causes and develop future prevention of recurrence. Our home is a participant in the Institute for Safe Medication Practicas (ISMP) trailblazer program. We have prioritized our approach to include residents and their families in the development of new risk reducing strategies. We determined that communication, awareness and involvement in medication decisions fosters a safer environment. We continue to build on this capacity and apply new technologies

that inform good medication decisions and provide transparency of plans and treatment.

At Anson Place we pride ourselves in providing a Safe and Secure environment for our residents, staff and all that enter. Our Home utilizes an upgraded security system that includes access codes and incorporating call bells in additional common areas. Anson Place has an active Joint Health and Safety Committee with certified members of the leadership team and unionized staff. The Joint Health and Safety Committee is a forum for making recommendations to improve the safety standards within our home.

Infection Prevention and Control (IPAC) is a community practice that is vital to keeping our residents and team members safe.Our home takes proactive measures to ensure strict adherence to IPAC practices while also staying current with the latest best practices. We do so by conducting regular audits of hand hygiene practices, PPE audits and auditing the cleanliness of high touch surfaces. If any deficiencies are identified during the audits, we make sure to address them promptly. Anson Place is partnered with IPAC Consulting to further develop our infection prevention and control competencies. Our home is proud to have an IPAC Lead that has successfully completed the Long Term Care Certification in Infection Prevention (LTC-CIP) to lead the IPAC efforts within the home.

PALLIATIVE CARE

Anson Place Care Centre is dedicated to the quality of care provided to our residents by integrating a Palliative Approach to care. In 2024 Anson Place received a Certificate of achievement in completing the collaborative approach to palliative care program. The goal of the program is to support the wishes and values of our residents while providing an understanding of the illness trajectory to families and resident. Through participation in this program we enhanced our registered staffs capacity to have conversations with residents and their families regarding early intervention and wishes at end of life.

As of March 27th 2025 Anson Place will be Adopting the RNAO Best Practice Clinical Pathway for Palliative and End of Life. The assessment and the RNAO clinical Pathway will support our registered staff in delivering early intervention and having the crucial conversations with our residents and their families about palliative and end of life care.

In 2025 Anson Place is working towards achieving certification in Excellence standing in the Ontario Prevention of Error-Based Transfers program (PoET Program). Through navigation of the PoET program it will further support our homes Palliative care capacity by advocating for the delivery of care for residents at palliative or end of life stages in the home. Our home strives to provide as much care as possible in home to keep our residents comfortable.

Our Home has an interdisciplinary Palliative Care Committee that meets monthly. The Palliative Care Committee works to ensure that the home provides holistic palliative/end of life care to our residents and families. Our interdisciplinary care team’s philosophy focuses on providing maximum levels of comfort, pain and symptom management and support to the resident and family to ensure quality of life is maximized during this difficult time.

POPULATION HEALTH MANAGEMENT

Anson Place is committed to partnering with other health service organizations to address the unique needs of the residents in our care. Our Home is focused on improving integrated care for our residents. The key to successful collaboration is to identify the health needs of our residents. The majority of our residents are older adults aged 65 or older. Older adults are susceptible to serve illness from communicable viruses such as Influenza or Corona Virus. Our home has a close partnership with the Haldimand-Norfolk Health Unit. The Haldimand- Norfolk Health Unit provide guidance on infection prevention and control (IPAC) practices, including monitoring for outbreaks, offering advice on managing infectious diseases, and supporting vaccination programs. The Haldimand- Norfolk Health Unit is very active in supporting our home in outbreak management assisting with containment efforts, conduct testing, and provide support for managing the spread of disease.

Every resident that moves into our home is unique, our home strives to provide person centered care to satisfy their care needs. Our homes external partner Behaviour Support Ontario (BSO) provides transitional support to our residents that have just recently moved into the home. Getting to know our residents at the time of move in helps us better understand the needs of our residents so that we can best support them. Our home prides ourselves in forming partnerships with external partners to provide specialized services to our residents as needed. Our home has a partnership with an external Wound care specialist that provides support to residents with complex or slow to heal wounds. Our home looks to continue to cultivate external partnerships in the future.

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