

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 30, 2023



OVERVIEW

Stirling Manor Nursing Home is now a 56-bed LTC facility in the township of Stirling-Rawdon. Prior to Covid-19 we were a 75-bed LTC. The MOH decided that 3 and 4-bed wards could no longer have more than 2 residents in the rooms. Our building is older, has 3 floors and one elevator that we use for transporting residents and meal service to the floors. We have applied several times to rebuild and in March of 2022, we were selected by the Ministry to rebuild plus the request to increase our bed count was approved so we will eventually be a 96bed LTC.

We just completed our Accreditation Canada survey mid-March 2023 and are waiting for the results. We revised our Mission, vision and values statement.

Our Mission is to enrich lives and offer new beginnings. That begins with every life we encounter; our employees, our residents and those who love and care for them, the community in which we operate, our stakeholders and those who are yet to become our residents.

Our Vision is “Each day we will strive to make a positive difference in the lives of others by forming meaningful partnerships”.

Our Values Statement

We are:

People who value and demonstrate integrity, respect, collaboration, and inclusiveness

People with energy, enthusiasm, and the courage to lead while embracing challenges

People who build relationships based on doing the right thing

Over the past three years during the COVID-19 pandemic, we have focused on Infection Prevention and Control. We were required to follow all mandates set by the MOH LTC and Public Health and these mandates changed quickly. We took a multi disciplinary approach with each new mandate. We would all gather, review the documents and implement the changes making them specific to our home. Our main goal was to maintain a safe environment for the residents and staff.

Hiring new staff continues to be challenging because the media has not made LTC inviting so we continue to struggle with HR issues. The HR issues are not "new" and was a concern for all LTC Homes in the province PRIOR to Covid-19. Unfortunately Covid-19 has created a HHR across all healthcare sectors.

REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

We did submit a QIP for 2022/23

PATIENT/CLIENT/RESIDENT ENGAGEMENT AND PARTNERING

A quarterly quality report is provided by the Administrator to the residents' council members to allow them input to quality improvement planning and implementation. Prior to Covid-19 we would have an annual family/resident information session allowing the family/resident opportunity to ask questions, provide input and feedback on quality improvement initiatives and operations of the home. Once the pandemic came we weren't able to have people in the home so we had to figure out a different way to communicate with families. We started sending out emails to family regularly to keep them updated with covid processes and how the residents were doing. We are still doing this and have found that a large portion of families prefer this means of communication.

Managers have an open door policy that allows the residents' access to all managers to discuss any concerns or quality improvement ideas that they may have. Managers play an active role on the floors providing easy access to all residents on a continuing basis.

PROVIDER EXPERIENCE

As we are nearing the end of the Covid Pandemic management, staff and families continue to be concerned about the shortage of healthcare workers in our province. Staff turnover is high as potential employees can go anywhere at any time so there isn't the commitment to an Employer like there was prior to Covid. There is continuous struggle with setting up interviews with potential employees and they don't even show up for the interview, and don't even call to let us know they won't be coming.

Sick time has increased and staff accepting call in shifts has decreased. We have noticed that our senior employees are the ones working doubles, accepting call in shifts and staying late. In 2022 we did staff appreciation days approximately every month to show our appreciation. Management have noticed that staff are tired, and deflated so the appreciation days are not received well by some staff.

We have had a few staff who had a retirement date in mind, but moved that date sooner with Covid-19 the primary reason.

Throughout the pandemic the residents, staff, caregivers and visitors have been kept informed of all requirements through email, Facebook and general communication within the home, and we will continue this practice as we hopefully move towards and Endemic.

WORKPLACE VIOLENCE PREVENTION

We provide education to all staff on a yearly basis on workplace violence. When we provide this education, if we have access to incidents that have occurred and/or are in the media, we share this with our staff and give the results of the incident.

Prior to Covid-19 we ensured all members of the H&S Committee were certified in Health & Safety training. Since then we have had some change in committee members. We are now able to get them the education that is required because training is available again. Both unions appreciated the opportunity to attend the sessions.

We have had a private investigator come in and provide education on bullying and harassment. It was well received by staff.

Our H&S committee selects 2 labour representatives from the committee to perform a Workplace Hazardous Inspection of the home. This is done in October of each year. The results of the inspection are signed by the 2 committee members and given to the Administrator.

The Administrator reviews the inspection and acts on concerns. This is done in writing to the committee with an explanation of how the concern has been addressed, and attached to the minutes.

All supervisors have an open door policy and encourage staff to report any situation that makes them feel uncomfortable.

We feel there is a good relationship between management and the unions in the home.

PATIENT SAFETY

Patient safety has been a priority in our home for many years and I feel each year we learn from situations that may occur. If there is a safety concern for anyone who is in our home, we gather as much information as possible to try and determine what happened, why it happened and is there anything we can do to ensure this safety concern doesn't happen again.

We do feel that being transparent about what happened with all parties involved is important, we want to ensure trust with everyone that is a part of our home, and we feel the way to gain/keep the trust is being honest about what happened, why and how we are trying to rectify the situation.

We believe that safety is for everyone that is apart of our home, staff, resident, caregivers, visitors, students and volunteers.

We have a Joint Occupational Health & Safety Committee, we strive to have all members certified in H&S, but with staff turnover and covid, we are finding that we have periods of time that not all members are trained. What adds to this is education is only offered twice/year in our area. With Covid restrictions being lifted, we hope to get all members on the team certified.

All meeting agendas have "Safety" as a standing agenda item.

HEALTH EQUITY

As a rural home we have not had different nationalities in our home. We do have some different religions with residents and staff. We have a few staff who have requested to work the Christmas holiday season so that they can have New Years off as this holiday is more important to them and their religion. Arrangements have been made between a few different staff to assist with this. Union was also made aware and were inclusive.

With the current staffing situations we are starting to hire different nationality nurses. This is new for residents and staff and sometimes there can be communication issues. Some residents require the international employees to repeat a sentence, but this is occasionally.

When National Day for Truth and Reconciliation holiday came into effect in 2021, we do acknowledge the day with staff and residents.

There is an employee that works in our home for more than 40yrs now who has a disability and she is well integrated in the home and has for many, many years.

Currently we don't have a resident that is 2SLGBTQIA+ but there have been discussions around inclusion as we want to ensure we meet their needs.

CONTACT INFORMATION/DESIGNATED LEAD

Charmaine Jordan Administrator cjordan@stirlingmanor.com

Fall 2022 the home was required to name a specific QI Lead for our home. I discussed with my Life Enrichment Supervisor Melanie Cannons that I believed she would do well in this role as she is always looking for ways to improve practices and/or taking something to the next level. Melanie accepted the QI Lead role. Our goal is that Melanie will be able to submit the QIP for the 2023/24 year.

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

Board Chair / Licensee or delegate

Administrator /Executive Director

Quality Committee Chair or delegate

Other leadership as appropriate
