



Quality Improvement Plan (QIP)

# Narrative for Health Care Organizations in Ontario

July 11, 2022



## OVERVIEW

Valley Manor's 2022/23 Quality Improvement Plan (QIP) is in alignment with the newly developed Mission for the home, "Empowering every person to provide compassionate Resident-Centered care in a diverse family environment". The QIP embraces the homes Strategic Plan 2022-2027 and builds upon the foundation of Integrity, Transparency, Leadership, Workplace Satisfaction, and Compassion. We continue the journey in redevelopment as our 90 bed not-for-profit home has a Category "C" status. The CEO is dedicated to the redevelopment process and has engaged the Resident's Council, other residents, their families/POA's/SDM's, the staff, and the public on the redevelopment process. The CEO has also ensured that the Valley Manor website has the most current information on redevelopment posted. Valley Manor has completed the demolition of Sherwood Public School where the future site of the new Valley Manor Long Term Care Home will be. There have been a number of pressures during the pandemic which have increased the cost of construction. Valley Manor expects that these pressures will impact the planned construction and we are working closely with the Capital Branch of the Ministry of Long-Term Care, Infrastructure Ontario, and our local MPP to continue moving the redevelopment of Valley Manor forward. Valley Manor also continues its partnership with the St. Francis Valley Healthcare Foundation, the Rural Health Hub Steering Committee, the Madawaska Community Circle of Health, Loyalist College, Behavioural Supports Ontario, and participates in the Joint Ethics Advisory Committee. The CEO and other members of the leadership team are also actively participating in the OHT and the CEO is participating with the enabler groups for the OHT such as

governance, communications, and finance. Components of the QIP are shared with these partners. Valley Manor's QIP continues to be developed with the voice of our residents and their family members/POA's/SDM's, and in effort to attain and sustain provincial benchmarks for long-term care quality indicators. This year the home will be focusing on Timely and Efficient Transitions in effort to reduce the number of potentially avoidable ED visits. The home will also be continuing to improve Service Excellence by implementing change ideas to build upon how well we are listening to our residents as the home increases their partnerships with the community. The CEO and the Leadership team will also continue to strengthen the relationship with the residents by working closer with them, and encouraging them to voice their opinions at Continuous Quality Improvement meetings, Resident's Council meetings, Multi-Disciplinary Care Conference Meetings, and with each interaction. In effort to ensure we are treating our residents with courtesy and respect and in a way that fully recognizes the resident's inherent dignity, worth and individuality a change idea will be implemented to ensure the resident voices their choice.

## REFLECTIONS SINCE YOUR LAST QIP SUBMISSION

Over the past 18 months our home has endeavored to adhere to changes in directives and to keep the residents and staff safe. Infection Prevention and Control measures were priority and education was provided each shift to residents, visitors, and staff in effort to prevent the spread of COVID-19. Implementing and communicating these changes was a team effort. Focusing on priority areas throughout the pandemic was essential, and it

improved care for our residents and improved practice for staff. Quality Improvements were made throughout the COVID-19 pandemic to ensure the residents, their SDM's, visitors, and staff were safe. The home added a Director of HR position to assist with the increase in HR requirements that the pandemic brought with it. Change ideas were implemented when the home changed meal service from Dining Room service to the delivery of tray service. Other changes implemented were the implementation of security, screening, and swabbing for COVID-19. The home also implemented quality improvements such as an Admission Checklist, and switched Pharmacy providers in effort to improve our medication management system. In response to the Long-Term Care Homes Public Inquiry we also completed the Medication Safety Self-Assessment for Long-Term Care. Changes were made to the physical environment of the home by creating a "Covid-Unit". Staff engaged in crash courses in infection control and negative pressure rooms that became part of the new unit. What we have learned most since our last QIP submission is how well our team prioritizes, works together, and how dedicated they are to the residents who call Valley Manor "home". Despite the Pandemic the home created a new 2022-2027 Strategic Plan which was created with the Board of Directors and our Leadership team in collaboration and with input from community partners, stakeholders, residents and families. Accreditation will take place in October of 2022 and there has been continuous and ongoing preparation for it. Partnerships continued to be developed throughout the Pandemic with the Renfrew County District Health Unit, the Pembroke Regional Hospital Infection Prevention, the Ottawa Public Health, and with the Funeral Directors to Manage

Resident Deaths within the home during the pandemic. We also partnered with the St. Francis Memorial Foot Care Clinic, Algonquin College, Loyalist College, Willis College, Native Education & Training College, CDSBEO, and the County of Renfrew Paramedic Service. We have seen improvements in resident outcomes through quality improvements throughout the past 18 months. As we aim to the future we will build upon our quality improvements cultivating a diverse home where all are welcome and respected.

## **PATIENT/CLIENT/RESIDENT PARTNERING AND RELATIONS**

To ensure that the resident's had access to specialists throughout the COVID-19 pandemic there has been an increase in virtual visits. Some of the challenges that the home faced were the need for more I-PADs to be available for the visits to occur, and the home did purchase the needed equipment. Changes to work flow were also made to allow time for staff to assist our resident's with these visits. The home also recognized that some of our residents who had hearing impairment were no longer able to read the lips of staff related to the need for staff to wear masks. Families were contacted and white boards were purchased to ensure the communication needs of the residents were met. Multi-disciplinary meetings continued, however no longer in person, but by teleconference. The home was also able to avoid a resident having to travel to the Ottawa Heart Institute to have his pacemaker checked by obtaining a Medtronic MyCareLink Smart Reader and downloading the app on a smart phone. The transmission went well with a follow-up transmission booked for next year. These opportunities are sustainable as the benefits of avoiding long days to travel to

consults with specialists place the resident's first, and that is our goal. Throughout the pandemic the Activity staff have offered virtual visits with the residents and their loved ones, along with telephone calls, window visits, and outdoor visits as the weather permitted. These visits continue for those visitors who are not vaccinated. The Infection Control Practitioner has provided education and training to all visitors about physical distancing, respiratory etiquette, hand hygiene, IPAC practices, and proper use of PPE to ensure the safety of residents, staff, and the visitor. This has become the new "norm", and is sustainable as the home has adapted to these changes over the past 18 plus months.

## **PROVIDER EXPERIENCE**

These have been unprecedented times for the world and for our home. Early in the COVID-19 pandemic long term care homes faced scrutiny and negative media. It also exposed staff-shortages, insufficient PPE, and neglect. The COVID-19 pandemic was stressful in itself; however this created increased anxiety among the front-line staff. At the same time the Ministry of Long-Term Care was communicating guidance documents along with the Ontario Chief Medical Officer of Health regarding the pandemic. From the beginning of the pandemic the CEO and Leadership team, along with the Infection Control Practitioner have provided outstanding communication to the staff. Mandatory weekly staff meetings were held to provide the most current information to the staff, ensuring staff were kept well informed and to allow for questions. At these meetings as well as other team meetings the Leadership team provided information to the staff on the homes Employee Assistance Program. This program was available to assist the

employee if they were in distress or needed some mental health support. Daily memo's to the staff were also created and distributed. At times the Guidance documents were emailed from the Ministry after midnight or on an early Saturday morning. The CEO and Leadership team acted swiftly to implement recommendations or directives in effort to keep the residents, their visitors, and staff safe. When mandatory vaccination was implemented by the Ministry this too was communicated to the staff. The Infection Control Practitioner was available to answer questions that staff had. The home made it convenient for staff to get vaccinated by hosting vaccine clinics. Unfortunately some staff chose not to become vaccinated, and this caused a staff shortage. The home hired Agency staff in response to ensure the needs of the residents were met, and that staff were working in a safe environment. There was also a pause of new admissions to ensure safety of all. The home recognizes and supports the staff by having an open-door policy, having regular team meetings, by communicating on the home page of Point Click Care, by Memo's, and general meetings. The home also provides monthly staff appreciation days and provides the staff a free meal. For those who are not working on the day of the staff appreciation day, there are sign-up sheets available so that staff who are off that day, can choose to join. All compliments received at the resident's Multi-disciplinary care conferences were communicated to the staff on the Home Page on Point Click Care. The CEO also posted all Thank-you cards to the staff from family members or residents outside of her office for staff to read and reflect upon. Recently the home received a grant for mental health support from Unity Health, and put the money towards health and wellness of all staff and

purchased 2 full body massage chairs for the team to use at any time. Recognition of the Valley Manor workforce is a component of the homes new Strategic Plan, and ensuring that the team is healthy and engaged leads to improved outcomes.

## **RESIDENT EXPERIENCE**

The COVID-19 pandemic brought many changes to our residents including social isolation from their family and friends related to mandates from the Ministry of Health & Public Health directives. Quality Improvements implemented by the Activities department to improve the resident's social index of engagement included 1:1 window visits with family or friends, virtual visits, and telephone visits. The Activities department also continued to offer Intergenerational programs virtually as well as window visits. Students from a local elementary school visited outdoors and a portable microphone was provided to them so that they could communicate with the residents. They performed songs and also performed a Halloween Parade. Residents were able to participate in the lounges socially distanced, or in the comfort of their rooms if they preferred. The Activity department also arranged for virtual spiritual visits with the local elementary school through Google meet, and the children and the residents recited the rosary. Pen Pals with local students were also arranged followed by a window visit so that residents and students could see who their Pen Pal was. These opportunities improved the resident's mood, decreased their anxiety, and improved their self-worth. Seniors provide a positive connection for our youth and often are strong role models for children to look up to and admire. Students often connect with the residents and form bonds that are very valuable to them

throughout their lives. As we continue our journey by placing the resident's first, ongoing use of technology and partnerships with the local school and day care will continue to be a priority. The nursing department also provide Rapid Antigen Testing 7 days per week to ensure residents can welcome visitors and friends and yet prevent the spread of COVID-19.

## **CONTACT INFORMATION**

Chantel Brown Nursing & CQI Coordinator Valley Manor Inc.  
613-756-2643 Ext. 232

Trisha DesLaurier Valley Manor CEO  
613-756-2643 Ext. 224

## 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 **June 28, 2022**

---

**Kathy Marion**, Board Chair / Licensee or delegate

---

**Trisha DesLaurier**, Administrator /Executive Director

---

**Chantel Brown**, Quality Committee Chair or delegate

---

**Gail Yantha DOC**, Other leadership as appropriate

---