

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 28, 2024



OVERVIEW

Wellington Terrace is a 176 bed long term care home operated by the County of Wellington. Wellington Terrace's Mission Statement is "together our team is committed to providing compassionate care honouring the unique needs of each resident."

Wellington Terrace is divided into 6 resident neighbourhoods with 28-30 residents living on each area. We believe that resident and family satisfaction is higher when residents are grouped together with other residents of similar care needs. As such, we have three neighborhoods with a dementia care focus, two neighborhoods that serve residents with more complex, heavy care and one that is lighter care serving those who are more mobile with less cognitive impairment. Currently, over 82% of our residents have a dementia diagnosis.

Our home is committed to ensuring that we follow best practice guidelines in geriatric care. As such, we have a strong focus on falls prevention, skin and wound management, dementia support, continence care and infection control. Each of these programmes is led by an RN champion who guides the team in setting goals and implementing best practices.



ACCESS AND FLOW

Wellington Terrace continues to work collaboratively within our healthcare system and strives to avoid emergency room visits whenever possible. Through assessment, physician availability, accessing diagnostic and clinical services onsite we have maintained a low rate of avoidable transfers to the hospital. In 2024, Wellington Terrace is endeavoring to hire a nurse practitioner who will contribute to these ongoing efforts through timely assessments and care.



EQUITY AND INDIGENOUS HEALTH

At the County of Wellington, we recognize and appreciate the importance of creating an environment in which all residents, visitors and employees feel valued, included, safe and empowered. We recognize that each individual's unique identity, experiences, perspectives, and viewpoints add to the culture of our home and enhance our ability to create and deliver the best possible service to our residents.

The County has a diversity and inclusion committee who is tasked with creating education and providing resources to all staff. In 2024, all managers at the Terrace will complete Diversity and Inclusion education.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Members of our management team are invited to attend both family and resident council to share organizational and quality improvement goals, as well as updates on the delivery of care and services.

Our Family Council meets with the Administrator quarterly. The Administrator is invited to discuss and seek input on policies, legislation, challenges and quality improvement successes and challenges. Our family council hosts an annual education event inviting families and members of the community for a presentation on a topic of interest.

Families and residents are provided with regular updates on our quality improvements efforts through newsletters, displays and presentations at resident and family council meetings.

We seek feedback from families after the death of their loved one. Surveys have helped us to enhance our palliative care program throughout the years. We also ask our families and residents to provide us with feedback following the initial and annual care conference. We appreciate the feedback on the extent and clarity of information we provide at the conference. We believe it sets the stage for their ability to respond accurately to the annual satisfaction survey by clarifying aspects of the resident's care.



PROVIDER EXPERIENCE

Wellington Terrace has been participating in the Psychological Health in the workplace programme through the Centre for Learning, Research and Innovation (CLRI). We have a robust action plan to address respect and incivility in the workplace as well as employ strategies to address employee mental health. In 2024, we will be doing a break room refresh for staff. This project will include setting up a quiet space for staff to have their breaks. The room will be equipped with comfortable furniture including massage chairs. In 2024 we will be offering an online education opportunity to all staff entitled "WeCare: How to help someone who is struggling and create a caring workplace culture."



SAFETY

The culture of safety at Wellington Terrace allows for swift

identification of risk with an organized and robust plan to ensure the safety of Residents and staff. Clinical policies on falls prevention, medication management and responsive behaviour include strategies to mitigate the risk as well as respond and evaluate the effectiveness of our safety plans.

The Emergency Plan has been prepared to facilitate a controlled and coordinated response to an emergency or perceived emergency occurring within or impacting Wellington Terrace. The goal is to protect the health, safety and welfare of the residents of Wellington Terrace if faced with an emergency. Wellington Terrace has policy and procedures to guide our emergency management of codes and alerts. Policies include:

Wellington Terrace has policy and procedures to guide our emergency management of codes and alerts. Policies include:

Code Black- Bomb threat

Code Brown- Chemical threat

Code Orange- External disaster

Code Red- Fire

Code Green- Evacuation

Code Yellow- Missing Resident

Code White: Managing Aggressive Behaviour and Threats

Contaminated Water Response

Heat Related Illness and Plan

Power Outage

Tornado Procedure

Pandemic Plan (which contains staffing contingency plan and resource stockpiling/ inventory management plan)

Employee Fan out list

POPULATION HEALTH APPROACH

We are seeing a number of individuals coming to live in long term care with Developmental Delays and acquired brain injuries. Caring for these individuals requires a level of expertise as many of these individuals have a dual diagnosis, their disability and dementia. Residents are coming to live at Wellington Terrace frailer and further along in their aging process. As a result, we are supporting more residents with palliative care and there is benefit to building the relationship with resident and family in order to provide them the emotional support that they require through the end of life journey.

Majority of the residents who come to live at the Terrace have been identified by Home and Community Support Services as 'in crisis'. This means that they have maximized the services and supports of Ontario Health prior to coming to the home. These residents are often very elderly and very medically compromised.

Wellington Terrace contributes to the Social Determinants of Health by employing 320 staff in full time and part time positions. We also provide an annual presentation at local high school with information about working with an older population covering topics such as dementia care, infection control and nutrition support for seniors. We are committed to providing work and stability for citizens of the County of Wellington.

Affordable wheelchair accessible transportation is limited in Centre Wellington. An accessible van is available for families to use to transport a resident in a wheelchair to medical appointments and social activities with the family. We believe continuing family traditions and embracing activities in the community gives residents improved autonomy.

We have embraced the new Reunification policies established to guide the admission process coordinated by the Waterloo Wellington Home and Community Care. We are pleased to know

couples can be reunited in a consistent coordinated process. Our teams support residents without family to provide items they may not be able to afford; as well as purchase gifts at their birthday or Christmas.

Our social worker and volunteer coordinator have recruited volunteer friends for residents with limited external contact from the community as a way to reduce social isolation and improve engagement and inclusiveness.



CONTACT INFORMATION/DESIGNATED LEAD

Peg Muhlbauer
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Wellington Terrace Long Term Care Home
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Fergus, Ontario

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

Safety | Effective | Custom Indicator

Indicator #1	Last Year		This Year	
	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)
To reduce the number of PSW agency hours required. (Wellington Terrace LTC Home)	2985	1500	0	NA

Change Idea #1 ☒ Implemented ☐ Not Implemented

Improve the staff experience for new staff as well as staff providing the orientation to new staff through the implementation of the PREP program.

Process measure

- The number of PSWs educated on the PREP program.

Target for process measure

- To have 45 PSWs attend the PREP program in 2023.

Lessons Learned

38 PSWs participated in the PREP training program in 2023.

Change Idea #2 ☒ Implemented ☐ Not Implemented

To hold Walk in Wednesdays throughout the year as a way of showcasing for the community jobs that are available at the Terrace

Process measure

- The number of walk in Wednesdays hosted in 2023

Target for process measure

- 3 Walk in Wednesdays held.

Lessons Learned

1 walk in Wednesday session was held in 2023.

Change Idea #3 ☒ Implemented ☐ Not Implemented

Participate in a education session at Centre Wellington High School sharing the roles available at the Terrace as well as volunteer opportunities

Process measure

- Classes attended in 2023.

Target for process measure

- A minimum of one class will be attended in 2023.

Lessons Learned

The Resident Care Manager attended one session at Centre Wellington Highschool to share job opportunities at Wellington Terrace and discuss career pathways for LTC.

Change Idea #4 ☐ Implemented ☒ Not Implemented

Explore opportunities for hiring international nurses

Process measure

- Number of international RPN education placements held at Wellington Terrace

Target for process measure

- One placement be held at Wellington Terrace in 2023.

Lessons Learned

We will continue to look for opportunities for international student placements.

Indicator #2	Last Year		This Year	
	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)
To reduce the number of Resident Falls (Wellington Terrace LTC Home)	18.80	15	19.80	NA

Change Idea #1 ☒ Implemented ☐ Not Implemented

To purchase additional high/low beds

Process measure

- Number of beds purchased in 2023

Target for process measure

- The home will purchase 5 additional high/low beds in 2023.

Lessons Learned

15 high low beds were purchased in 2023 to assist with falls prevention strategies.

Change Idea #2 ☒ Implemented ☐ Not Implemented

Add to the Team Meeting template a prompt to discuss new admission falls risk and develop strategies for mitigating the risk.

Process measure

- Number of new admission falls risk discussed at team meetings

Target for process measure

- 100% of new admissions will have their falls risk discussed at team meetings.

Lessons Learned

New admission falls risk is discussed at weekly neighbourhood team meetings.

Change Idea #3 ☒ Implemented ☐ Not Implemented

Education for Registered staff on medications that impact resident falls risk

Process measure

- Number of Registered staff to received the education.

Target for process measure

- 100% of RN and RPNs will receive education on medications impacting falls risk either through in person education or through our online learning system.

Lessons Learned

Falls prevention education was provided to all staff in 2023 with an additional education session for the registered staff in March 2024.

Change Idea #4 ☐ Implemented ☒ Not Implemented

Falls education to be added to the television at the visitor entrance.

Process measure

- Slides added to the television on falls prevention.

Target for process measure

- Slides will be added by May 1, 2023

Lessons Learned

This television was relocated. However, fall prevention education is available for families on the website and in the new admission handbook.

Comment

We will continue to work on this goal in the 2024/2025 QIP.

Equity

Measure - Dimension: Equitable

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education	O	% / Staff	Local data collection / Most recent consecutive 12-month period	0.00	6.00	We believe all managers should have this education.	

Change Ideas

Change Idea #1 All senior managers will complete education on Equity, Diversity, Inclusion in 2024.

Methods	Process measures	Target for process measure	Comments
Education Lead will coordinate the education when it is offered by the County Wellness Committee.	Number of managers to attend Equity, Diversity, Inclusion education in 2024.	100% (6/6) Senior managers will complete this education by March 30, 2025	Total LTCH Beds: 176

Safety

Measure - Dimension: Safe

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC home residents who fell in the 30 days leading up to their assessment	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	19.80	18.00	As we are a restraint free home our falls rate is slightly above the provincial average. With the level of cognitive impairment and frailty that residents are experiencing entering LTC facilities this is a realistic target.	

Change Ideas

Change Idea #1 Educate residents and their family members on fall reduction strategies

Methods	Process measures	Target for process measure	Comments
The falls prevention team will create new content to go on the Wellington Terrace website in the family resource area.	Number of visitors to the family resource area of the website.	100% of families are informed about the education resources that are available to them on our website.	

Change Idea #2 Provide staff education on fall prevention.

Methods	Process measures	Target for process measure	Comments
Education will be assigned to staff in Surge learning.	Percentage of active staff who have completed the falls education.	100% of direct care staff will complete the falls prevention education assigned in Surge learning by Dec 31, 2024.	