

Let's Make Healthy  
Change Happen.



## 2016/17 Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario



### The McCall Centre 21 Bed Long-Term Care (LTC) Interim Unit

March 31, 2016

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

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## Overview

We all want to be well and as healthy as we can be – at every stage of our lives.

Trillium Health Partners' Strategic Plan outlines our mission of a new kind of health care for a healthier community. We envision a new approach to health – an inter-connected system of care that is organized around the resident, inside the long-term care (LTC) interim unit, and beyond its walls: an approach that provides excellent care today and continued leadership for improving care tomorrow.

Quality, Access and Sustainability are the foundational goals of our Strategic Plan, and core drivers of our success. These strategic goals anchor our efforts and everything we do within our LTC Interim Unit. Our commitment to quality is also embedded in our Quality and Resident Safety Program. It is our priority to provide residents and families the highest quality care and an exceptional experience that is responsive to their needs, preferences, values and goals. Our Quality and Resident Safety Program also encompasses the advancement of our safety culture, a focus on measurement and reporting of quality, and a commitment to quality assurance. The Quality Improvement Plan (QIP) represents one key component of this program.

As we continue to expand our capacity for resident care, we remain committed to improving and sustaining the delivery of high quality care. This year's QIP builds on the improvement efforts we made in the last year:

| THP Strategic Plan Goal | HQO Quality Dimension | Goal  | 2016/17 Priority Indicator   |
|-------------------------|-----------------------|---|--|
| Quality                 | Resident-Centered     | We will improve the experience of residents and families who trust us with their care                                   | Resident Survey Results- "Would you recommend this nursing home to others?"  |
|                         | Effective             | We will reduce the number of residents who experience worsening bladder control   | Percentage of residents with worsening bladder control during a 90-day period  |
|                         |                       | We will reduce the number of residents who are taking an antipsychotic without a diagnosis of psychosis                 | Potentially inappropriate antipsychotic use  |
|                         |                       | We will minimize the number of residents transferred to Emergency Departments where the visit was potentially avoidable | Number of Emergency Department (ED) visits for modified list of ambulatory care sensitive conditions (ACSC) per 100 long-term care residents |
|                         | Safe                  | We will reduce the number of falls for our residents  | Percentage of residents who had a recent fall (in the last 30 days)  |

| THP Strategic Plan Goal | HQO Quality Dimension | Goal   | 2016/17 Priority Indicator   |
|-------------------------|-----------------------|--|--|
|                         |                       | We will reduce the number of worsening pressure ulcers for our residents | Percentage of residents experiencing worsening stage 2-4 pressure ulcers |
|                         |                       | We will maintain our philosophy of no restraint use for our residents    | Percentage of residents who were physically restrained (daily)           |

## Integration & Continuity of Care

Our organization's commitment to partnering with other health care providers is based on the belief that we are all in this together. While we can make improvements within the hospital and the LTC Interim Unit to advance our mission, we cannot be sustainable without our partners in the community.

An example of this focus is Seamless Transitions, a partnership with the Mississauga Halton Community Care Access Centre (CCAC). This initiative has helped to identify opportunities to enhance the hospital and CCAC discharge processes, by coordinating with patients and families to plan and manage discharge and post-discharge care. We continue to look for ways to improve the coordination of patient care because better coordination and planning makes the transition much easier for patients and residents and typically means patients and residents can leave the hospital and interim LTC unit more quickly, freeing up beds for others who need them.

## Resident Engagement

Since residents are at the centre of the care that we provide, engaging residents and their families in how we improve quality is critical. Through our Residents' Council, we are listening to residents and families to understand what matters most to them.

## Accountability Management

With oversight from the Board of Directors, the local and corporate executive team will be held accountable for the overall performance of the LTC Interim Unit through quarterly reviews and evaluations of the priority indicators.

| THP Strategic Plan Goal | HQO Quality Dimension | 2016/17 Priority Indicator  | Target and Rationale                            |
|-------------------------|-----------------------|---|---|
| Quality                 | Resident-Centered     | Resident Survey Results- "Would you recommend this nursing home to others?"   | 100%<br>Sustain theoretical best                |
|                         | Effective             | Percentage of residents with worsening bladder control during a 90-day period | 12%<br>Reach Extendicare's Marker of Excellence |
|                         |                       | Use of antipsychotics for residents who do not have a diagnosis               | 12.5%<br>Reach Extendicare's                    |

| THP Strategic Plan Goal | HQO Quality Dimension | 2016/17 Priority Indicator  | Target and Rationale                              |
|-------------------------|-----------------------|---|---|
|                         |                       |   | Marker of Excellence                              |
|                         |                       | Number of emergency department (ED) visits for modified list of ambulatory care sensitive conditions* (ACSC) per 100 long-term care residents | 0%<br>Maintain rate below MHLHIN Average          |
|                         | <b>Safe</b>           | Percentage of residents who had a recent fall (in the last 30 days)   | 9%<br>Reach Health Quality Ontario's Benchmark    |
|                         |                       | Worsening Stage 2-4 pressure ulcers   | 1.24%<br>Reach Extendicare's Marker of Excellence |
|                         |                       | Residents who were physically restrained (daily)  | 0%<br>Sustain theoretical best                    |

## Sign-off

I have reviewed and approved our organization's 2016/17 Quality Improvement Plan



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Mr. Edward Sellers  
Board Chair



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Ms. Karen Wensley  
Quality Committee Chair



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Ms. Michelle D'Emancio  
Chief Executive Officer



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Dr. Dante Morra  
Chief of Staff



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Ms. Kathryn Hayward-Murray  
Chief Nursing Executive