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



3/31/2023

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.

[ontario.ca/excellentcare](http://ontario.ca/excellentcare)

## Overview

Crescent Park Lodge is a Long Term Care facility with capacity for 54 beds. As part of Conmed Health Care Group, we take great pride in the daily delivery of top quality resident care.

Our top quality and person-centered approach ensures that we are people's first choice as their home for long term care.

We believe that people are our greatest asset - residents, families, staff and volunteers. In recognizing this, we need to uphold the following values; person centered care; honesty, and integrity; confidentiality; ethics; and workplace health and safety.

In reviewing our last work plan, we are proud of our accomplishments. Over the course of the last year, we have fully implemented a number of new technological processes and tools that allow for more timely and effective care delivery, documentation, regulatory oversight and more streamlined communication.

We continue to collaborate as a strong interdisciplinary network both internally as well as with our community partners and resources, and most importantly with our residents and family members.

Historically, we have been able to develop and maintain a community-minded framework within our Long Term Care home for all aspects of our activities and interactions. We have accomplished this by using our multi-disciplinary approach to care and through educating residents/family members and staff from the point of admission or hiring about the importance of expressing their opinion and that all have a valued role in contributing to personalized care, as we are all members of the same team; "a community".

Our interactions (staff, resident and family members) and shared experiences has only served to strengthen this bond.

## Reflections since your last QIP submission

Crescent Park Lodge has made great strides in enhancing our communication and documentation processes. We have newly implemented updated policies that align with the "Fixing Long Term Care Act."

Resident family participation has increased as seen through higher attendance at our Continuous Quality Improvement Plan Meetings as well as at our annual Medication Safety Review Meetings.

Over the past year, participation in resident council and food committee meetings has improved. The residents have demonstrated increased participation in decision making, they feel they are more confident with expressing concerns and more confident that they are being addressed. This is evident as feedback has been more positive, purchases have been made based on resident requests, and new menu items are being trialed often.

Resident and family member attendance remains a priority at all Care Conferences. Family members who are unable to attend are offered the option of participation via Skype or via telephone and all residents are included in their Care Conferences whenever possible.

We continue with weekly Corporate/Management Meetings that are department specific where ideas and new plans and information is effectively shared as well as educational opportunities according to any newly implemented measures to be initiated.

## **Patient/client/resident engagement and partnering**

We have codesigned initiatives related to QIPs with diverse representation from residents by allowing residents to have personalized input with regards to seasonal menus and specific food choices via food committee. Another example of this would include allowing residents to make suggestions and have choice in community outings as well as choosing restaurants for meal club, this is done via resident council.

Our residents also have the opportunity to discuss and provide input with regards to daily group programs inline with their physical, spiritual, social, emotional and cognitive needs on a regular basis or anytime there is a concern.

We have incorporated experience feedback from residents and caregivers via satisfaction surveys, resident and family council meetings, yearly program evaluations which includes feedback from residents and as well by monitoring resident engagement via Welbi.

## **Provider experience**

Our organization's experience related to health care provider burnout and staff shortages has been challenging. Crescent Park Lodge has been fortunate enough to have the ability to contract the services of agency nursing staff who are strictly dedicated to working as members of our team. This was a highly valuable asset in minimizing staff burnout and maintaining continuity and quality care of our residents. We have employed the use of electronic recruitment to increase the amount of applicants, streamline the process and broaden the search.

We are supporting our health care workers by recognizing significant dates like anniversary's, retirements, and student completions. We as an interdisciplinary team collaborate to mutually support each other across all disciplines and roles. As a management team we plan to initiate a wellness committee involving staff, we will continue to develop new ways to show appreciation for our staff, and we will collaborate to ensure each department feels valued and supported.

We are engaging health care workers in identifying opportunities for improvement by completing bullet rounds weekly, in-services and providing education that is interactive and requires participation. We are engaging our registered staff by having them be a part of our auditing process for resident care measures. We engage PSW and registered staff in weekly RAP meetings.

## **Workplace Violence Prevention**

Workplace violence prevention is a priority for our organization, this is evidenced as there is a brochure included in our new hire paperwork that provides information to all employees about how to recognize workplace violence in all aspects of the home and what to do about it. It is a requirement that each management and staff member be educated on workplace violence prevention annually. It is the expectation and obligation that each and every person adhere to the policy to not only protect themselves but also others.

Over the course of the year we have worked collaboratively with our corporate partners in order to improve our workplace violence prevention program. We have done this by participating in cultural sensitivity training, by participating in GPA training, by completing a physical environment risk assessment tool and by completing a work practices, policies, and procedures risk assessment tool in order to collect feedback prior to updating our in house Workplace violence prevention policy.

This year we have planned to do something different by investing to improve this are. We have done this by enrolling every joint health and safety member in the 5-day training in order to ensure that every member become certified.

Information about workplace violence incidents that have taken place within the home are discussed on a quarterly basis at JHS meetings, the information is also shared in a document via teams and is therefore discussed at daily morning huddles, weekly bullet rounds, monthly staff meetings, and quarterly PAC and CQI meetings.

## **Patient safety**

Resident safety incidences are documented and tracked using our electronic Risk Management Reporting Program in Point Click Care.

This data is analyzed for how each incident was managed, the effectiveness of management strategies and whether alternative actions were required.

This information is shared at quarterly Professional Advisory Committee Meetings, Continuous Quality Improvement Meetings, Resident Council Meetings, Family Interest Group Meetings and staff meetings.

This information is also shared and discussed at Daily Management Morning Huddle Meetings and Weekly Bullet Round Meetings.

The goals of these discussions are to identify trends and work together with the common goal of risk minimization.

### Health equity

As an organization we are open to educating not only our staff but our residents also. We offer in-service educational programs. When opportunities arise from outside of our organization we allow and encourage any and all staff to participate in the learning experience.

Over recent years our care team had become more culturally diverse.

Through mutual support and respect, our care team members works well together with the common goal of delivery of quality care to our residents.

### Contact information/designated lead

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### 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

Board Chair / Licensee or delegate Neil Simon \_\_\_\_\_ (signature)  
Administrator /Executive Director Ray Johnson \_\_\_\_\_ (signature)  
Quality Committee Chair or delegate Grace Zhang \_\_\_\_\_ (signature)  
Other leadership as appropriate Belinda Graye \_\_\_\_\_ (signature)