Sunnyside Home

2024/2025 Quality Improvement Initiative Report

Preamble:
This Quality Improvement Initiative Report outlines the quality improvement initiatives that Sunnyside Home will work towards in 2024/2025.

Quality Improvement Priorities:
1. Person Centered Care and Resident Experience
2. Reduce ED Visits
3. Restraint Reduction

How did Sunnyside select these ideas?
The selection process for the ideas in Sunnyside’s Quality Improvement Report included the following:

- Engagement with members of the Sunnyside leadership team: Medical Director; Director, Seniors’ Services; Administrator, Long-Term Care; Manager, Resident Care; Manager, Food and Environmental Services; Coordinator, Quality Improvement and Risk Management; and the Social Planning Associate.

- Consultation with stakeholders: 1) The Resident Leadership Team, 2) Professional Advisory Committee, 3) Quality and Risk Management Committee, and the 4) Continuous Quality Improvement Committee.

- The selection process included: review of statistical data, stakeholder focus group feedback and surveys, and review of related policies and procedures.
How will Sunnyside communicate and monitor the progress of these ideas?

Sunnyside will:

- Share updates, action plans and address pressure points with the Quality and Risk Management Committee (as necessary).
- Share bi-annual updates and address pressure points with the Continuous Quality Improvement Committee.
- Share updates with the Resident Council Leadership Team (as relevant).
- Share updates with the Interdisciplinary Team (as relevant).
- Share and monitor progress with workgroups that are guiding the initiatives (as applicable).

If you have questions about this report please reach out to:
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Quality Improvement Initiatives:

1. Person Centered Care and Resident Experience

Current Performance:
Survey results from our 2023 resident experience survey, completed in September through November of 2023, informed improvement initiatives for our 2024 report. Survey results revealed the following opportunities:

- Residents and care partners identified the need for additional staffing.
- Residents and care partners expressed concerns specific to the atmosphere in the dining room during mealtimes.
- Residents requested that we provide reminders of meal options (e.g., ability to mix and match items on the two show plates).
- There were concerns from care partners that the recreational programming being offered was not of interest to the residents.
- There were concerns from residents and care partners about lost clothing items.
- There were care partners who were confused about how physicians work in long-term care.

How Sunnyside is going to improve:
Based on the key areas of opportunity from the findings of the survey, the following improvement opportunities will be completed:

- Increase staffing levels through the hours of care funding.
- Implement person-centred dining guidelines.
- Seek guidance from the Resident Leadership Team on supporting a person-centred approach to care.
- Promote resident’s choice and seek resident feedback in the selection of menu items. Residents may mix and match items from the show plates or may choose one of the "always available" items.
- Engage residents in the design of recreational programming.
- Conduct a review of the resident clothing labelling process to determine if there are ways in which it could be improved.
• Provide education regarding how physicians work in Long-Term Care.

How survey results were shared (opportunity for input/feedback):
• Results shared with Resident Leadership Team, February 2024.
• Results shared with Interdisciplinary Team, March 2024.
• Draft recommendations approved by the Resident Leadership Team, April 2024.
• Results posted on the website, May 2024.
• Results included in Community Newsletter, May 2024.
• Results shared at a virtual Family Town Hall, June 2024.

Project Lead: Kelly Buxton, Social Planning Associate

2. Restraint Reduction

Current performance:
As of March 2024, Sunnyside had a restraint usage rate of 1.8% for its resident population. The rate of 1.8% is above our internal target of 0, as we are striving to be a no restraint facility. Notably, however, our rate of restraint usage is below the provincial average of 2.2%.

How Sunnyside is going to improve:
Sunnyside Home will work towards reducing the rate of restraint usage among its residents, with an ambitious target of being a restraint free home. Key areas of improvement work include:
• Workgroup to focus on restraint reduction: targeting zero restraints.
• Develop and deliver education and communication materials for staff, physicians and Sunnyside’s Nurse Practitioner based on updated restraint policy.
• Refresh to admission package information (and guided discussions) to indicate to new residents (their families or SDMs) that we have a philosophy of no restraints.
• Review benefit/risks specific to restraint use for current residents: can they be removed?
• Direct attention to new admissions to reduce/avoid restraint usage.
• Educate staff, residents and POAs about risks and alternatives to restraints.

**Project Lead:** Marie Belanger, Manager of Resident Care

3. **Reduce Avoidable Emergency Department Visits**

**Current Performance:**
Sunnyside Home’s avoidable Emergency Department visits is currently reported at 11.1%, which is significantly below the provincial average of 21.0%. We will strive to further reduce our rate to 10.0% with support from the Nurse Practitioner and related project efforts.

**How Sunnyside is Going to Improve:**
Sunnyside Home will work towards further reducing Sunnyside will implement the following actions:

- Provide on-going education to registered staff on early recognition of acute symptoms to ensure appropriate care and Emergency Department visits are avoided, if possible.
- Sunnyside Home is enrolled in the pilot program "Seamless Care Optimizing the Patient Experience" (SCOPE) with local hospitals. The program supports better access to care between long term care homes and local hospitals to avoid unnecessary hospital admissions and Emergency Department visits.
- We will revamp our Palliative Care program/policy language, specific to palliative philosophy.
- Registered staff, physicians and our Nurse Practitioner will engage in early and on-going conversation with residents and care partners about the palliative care program and philosophy. Information about how Sunnyside can support residents at end of life will be a focus of Emergency Department diversion education.

**Project Lead:** Project Lead: Christine Mance, Nurse Practitioner