

Let's Make Healthy
Change Happen.



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



**Yee Hong Centre
For Geriatric Care**

頤康中心

4/4/2019

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

Overview

Yee Hong is a non-profit senior care organization, delivering high-quality, culturally appropriate services to Chinese and other ethnic seniors since 1994. Operating 805 long-term care home beds and a wide range of community support services, Yee Hong annually serves over 15,000 individuals across the Greater Toronto Area.

Mission

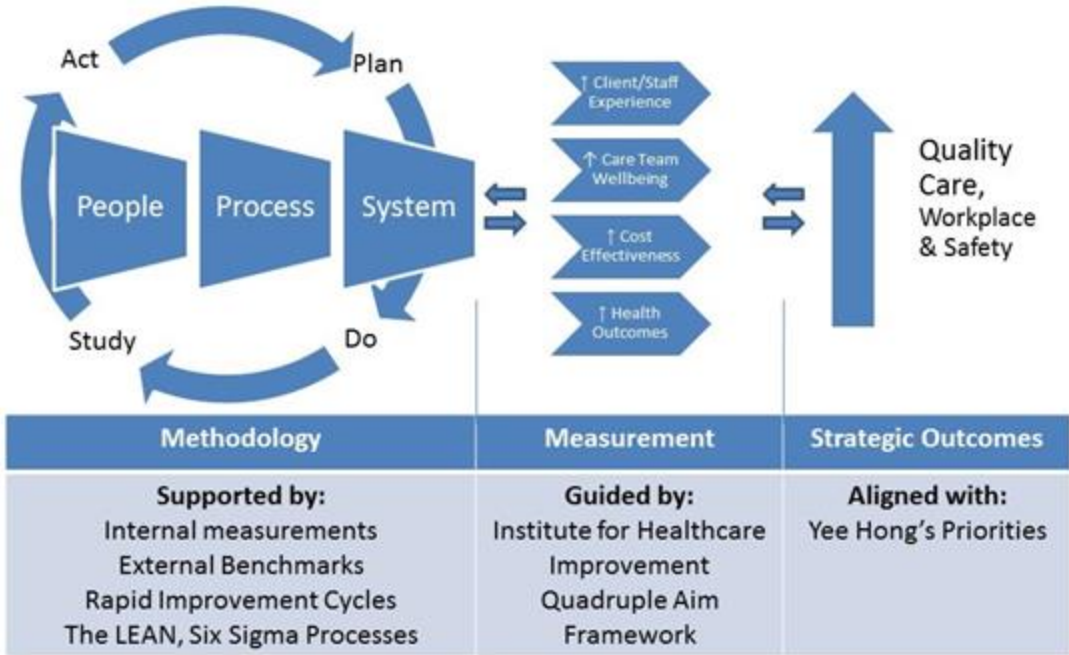
With strong roots in the Chinese Canadian community and our respect for seniors, we enable seniors of different backgrounds and needs to live their lives to the fullest - in the healthiest, most independent and dignified way. We provide a continuum of culturally and linguistically appropriate care.

Quality improvement model at Yee Hong

Yee Hong's vision is to be the model of excellence in culturally appropriate seniors' care. A Quality Improvement (QI) Model has been developed to guide Yee Hong's quality improvement and client safety planning and initiatives. The QI model is based on four principles: evidence-based, client-centered, provider-informed and corporately aligned. Supported by analytical processes and using annual surveys results, Yee Hong has determined a strong association between (a) employee engagement and employee satisfaction; and (b) employee satisfaction and resident/family satisfaction. Furthermore, Yee Hong has identified key factors that could predict the level of job satisfaction for various groups of employees. Guided by these findings, Yee Hong incorporates the well-established Institute for Healthcare Improvement QI processes and the Quadruple Aim Framework to ensure that Yee Hong's quality improvement, client safety and employee engagement initiatives will positively realize health outcomes, client experience, cost effectiveness and care team well-being. The model depicts quality improvement as an integrated and continuous process that will be adjusted according to outcomes meaningful to Yee Hong's strategic directions and goals. The following diagram provides a visual depiction of the model and its components.



Quality Improvement Model



Describe your organization's greatest QI achievement from the past year

LTC eConnect project

At Yee Hong, creating a culture of patient safety is a significant priority. One of the ways we aim to improve patient safety is through timely access to resident health records for improved clinical decision making.

The LTC eConnect solution is a secure and integrated portal allowing real-time access to the resident's health record information such as medication history, laboratory and diagnostic results, hospital visits, and community care services. LTC eConnect helps staff and system efficiency by (1) reducing duplicate tests and procedures, unnecessary paperwork and follow-up calls, (2) saving time/cost and (3) avoiding resident and staff frustration. Timely access to health records can improve consistency in care approach between the LTC homes and hospitals, improve quality of care, and resident/family satisfaction. It allows interprofessional providers to make faster, more informed care decisions.

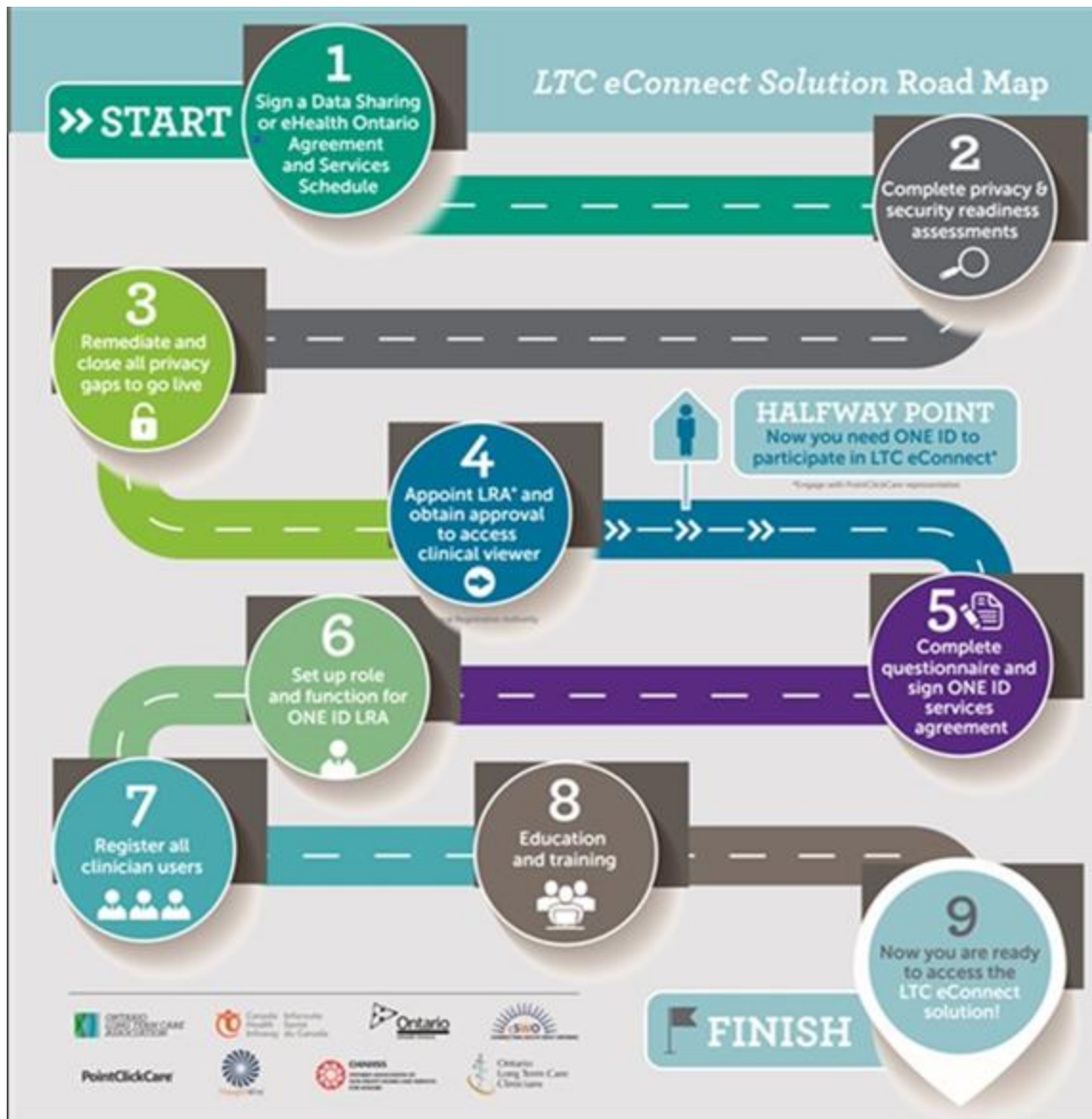
Prior to LTC eConnect, when a resident is hospitalized or had an emergency department (ED) visit, staff had to call the hospital, ask the resident/family, or wait for the discharge reports/diagnostic results to plan and deliver appropriate care plan. When the resident's health information is not readily available, clinical decision making and care planning may delay and unnecessary suffering may result. There may also be risks related to communication breakdown.

The Yee Hong Documentation Committee, consisting of inter-professional staff and senior leaders, provided oversight to the LTC eConnect project. A Director of Resident Care was assigned to lead a task force to complete the required project

implementation steps as shown in the diagram below. This dedicated task force, along with peer-to-peer support, helps ensure that the project rolls out smoothly and in a sustainable manner across our four Long Term Care homes. The project implementation was completed in 4 months, two months earlier than scheduled.

To ensure resident privacy and data security when using LTC eConnect, Yee Hong collaborated with the Sunnybrook eHealth team to develop a training module for the existing and new staff. Each staff was provided with an appropriate security access level. They completed mandatory privacy and security training online and received an in-person classroom training with a hands-on demonstration. Residents and families were informed about the project and given a choice to participate.

Since having access to the resident's health information via LTC eConnect, staff understands the resident's most current condition, able to provide more timely and confident care including referrals to the appropriate interprofessional members. Staff also shared many positive experiences in which they saved time, avoided unnecessary incident reporting, and were able to provide immediate answers to the family's questions to reduce their concerns or anxiety. A post-implementation survey showed that over 80% of users were strongly or moderately satisfied with LTC eConnect. They felt that they had received adequate support from the project team and the use of LTC eConnect has improved the resident's care and workflow while reducing staff workload.



Patient/client/resident partnering and relations

Guided by the Residents/Clients and Family Care Approach recommended by Accreditation Canada, we foster respectful, compassionate, culturally appropriate and competent care that reflects the resident/client’s care needs, values, beliefs and preferences. Each resident and his/her significant other(s) are expected to be treated as unique individuals, with dignity and respect while living the Yee Hong Center values that promote person centeredness.

We ensure our seniors and their families are partners in their care. We achieve this by supporting them to better understand and meet their individual needs and preferences. We meet regularly with them via meeting opportunities such as Resident and Family Councils at each LTC home and Quality Committee and Focus Groups at the Community and Professional Services Division. We conduct resident, family and client satisfaction surveys every year to seek their feedback on our performance. We develop and implement actions according to the survey results. We regularly share care program materials with representatives of the Resident and Family Councils or tea gatherings so they can provide feedback and suggestions for

improvement. The same materials are shared with the frontline staff so they can reinforce the information if necessary.

We use different approaches to engage our resident/client and families, e.g. informing them how they can be involved in the resident's care, inviting them to participate in our strategic planning, consulting them on the care program development, and seeking their input on relevant care policies. We also monitor their concerns and compliments to evaluate our partnership with them. In 2018, we monitored the following indicators on a quarterly basis to understand our work in person-centered care, timeliness, and equity: (1) number of compliments, (2) number of concerns/complaints, (3) average wait time from application to LTC home admission for non-crisis residents, (4) % 24-Hour care plan completed within 24 hours of admission, (5) % user defined assessments completed within 24 hours of admission, (5) % home support clients who receive services within 24 hours of hospital discharge, (6) % home support clients who received services within 7 days of admission to the program, and (7) % customers who choose Yee Hong due to cultural needs and their satisfaction levels on Yee Hong's ability to provide culturally appropriate care and services.

To better support the resident and family members in engaging strategies at Yee Hong, the Board's Quality Committee welcomed a Family Member-at-Large (FMAL) to the committee. The role of the FMAL member is to support Yee Hong's mission, purpose and beliefs. He will share ideas and viewpoints during discussions and will identify potential solution(s) to improve care and services. The overall goal is to improve quality, patient safety and innovation governance at Yee Hong.

Workplace violence prevention

Yee Hong's strategic plan includes two enablers. The people and technology enabler focuses on enabling staff, affiliated medical and allied health professionals, and volunteers to encompass a healthy workplace.

Semi-annually, Yee Hong reports Enterprise Risk Management (ERM) Dashboard to the Board of Directors. As well, Yee Hong has a documented and coordinated approach to monitor, reduce and prevent workplace violence. Steps/measures include:

- Workplace violence prevention program and policy plus supporting policies such as Respect in the Workplace, Code White, Incident/Injury Investigation, Risk Management, Joint Health and Safety Committee. The policy includes classifications and strategies for addressing workplace violence, roles and responsibilities, reporting procedures and education and training
- Zero tolerance communications across all divisions
- Risk assessments have been conducted within each division to ascertain the risk of workplace violence
- Process for team members to confidentially report incidents of workplace violence; and investigate and respond to incidents of workplace violence
- Regular reporting to the organization's leaders related to incidents of workplace violence, and actions to improve safety and reduce incidents of violence
- Information and training is provided to employees on the prevention of workplace violence :
 - Corporate orientation and annual training
 - Code white drills are regularly practiced at all Yee Hong Centre sites.
 - Code white awareness has been incorporated into mandatory annual corporate training
 - CPI crisis prevention training

- Code white response teams are in place at Long Term Care Homes; Incident response strategy suited for Community and Professional Services is also in place
- Bill 132 - Ontario's New Sexual Violence and Harassment Legislation - has been incorporated into the Workplace Violence Prevention policy and addressed in the annual staff training
- 2018 Employee Engagement Survey included a related survey question: My organization takes effective action to prevent violence in the workplace.

Contact Information

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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

Title	Name	Signature
Board Chair	Corinne Wong	
Quality Council Co-Chair	Vimal Kurian	
Chief of Staff/Clinician Lead	Agnes Wong	
CEO/Executive Director/Admin. Lead	Tracy Jones	
Other Leadership as appropriate		