# **Hogarth Riverview Manor**

19 Quality Improvement Plans 24/25 (QIP): Progress Report on the 2023/24 QIP

	Last Year		This Year	
Indicator #16 Percentage of respondents who responded "Yes, Definitely" to	32.80	34.80	27.70	NA
the following question "Do you feel that you can raise a concern about staff without it affecting your (or your family member's) care?" (Hogarth Riverview Manor)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

# Change Idea #1 🗹 Implemented 🛛 Not Implemented

Increase resident and family awareness of Whistle Blower Protection Policy

#### **Process measure**

• Whistle Blower Protection added as standing agenda item to council meetings. Number of monthly newsletters that include information about Whistle Blower Protection

#### Target for process measure

• By April 30, 2023 implement as a standing agenda item 8 monthly newsletters will include Whistle Blower Protection Information

# **Lessons Learned**

100% of Goals were met with implementation of 8 whistleblower protection newsletter inserts.

# Change Idea #2 ☑ Implemented □ Not Implemented

Increase resident and family awareness and access of Clinical Resource Coordinator (CRC) and Resident & Family Experience Coordinator

#### **Process measure**

• Add content about CRC and Resident & Family Experience Coordinator positions to the newsletter, and when introducing new residents and families to available resources within the home

## Target for process measure

• Content will be added by April 30, 2023

## **Lessons Learned**

Position information has been added to the Resident and Family Handbook including information within a newsletter.

Change Idea #3 ☑ Implemented □ Not Implemented

Strengthen processes to support Indigenous clients to report a concern

#### **Process measure**

• Identify process improvements and implement.

## Target for process measure

• Process improvements implemented by July 31, 2023

## **Lessons Learned**

An Indigenous Health Associate staff is onsite 3 to 4 days per week to support residents.

	Last Year		This Year	
Indicator #7 Percentage of respondents who responded "Always" to the	43.10	46	41.70	NA
following question "How often did staff involve you in planning your (or your family member's care)? (Hogarth Riverview Manor)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

# Change Idea #1 ☑ Implemented □ Not Implemented

# Continue pre-admission meetings with resident and families

#### **Process measure**

• Percentage of pre and post admission meetings/follow up

## Target for process measure

• 1 pre-admission meeting per week. 80% of new admissions will receive post admission follow up call.

# **Lessons Learned**

By quarter 3, 100% of new admissions received a pre and post admission meeting/follow up.

# Change Idea #2 ☑ Implemented □ Not Implemented

# Continue monitoring call bell response times

## **Process measure**

• Number of call bell reports monitored, posted, discussed, and action taken where needed

# Target for process measure

• 26 call bell reports will be pulled, posted, and discussed during huddles throughout the year.

# **Lessons Learned**

Call bell response times are reviewed on bi-weekly basis in all home areas

# Change Idea #3 🗌 Implemented 🗹 Not Implemented

Increase White board huddle participation growth to families and residents

## **Process measure**

• Percentage of huddles where Families and Residents attend whiteboard huddles.

#### Target for process measure

• Residents and families will attend 10% of huddles.

## Lessons Learned

Change idea modified to give families opportunity to create "quality improvement tickets" for consideration in each home area.

Change Idea #4 ☑ Implemented □ Not Implemented

Managers will engage Resident and Family members during walkabouts asking the conversation starter questions: -What's going well, what's not going well? -What support do you need?

#### **Process measure**

• Percentage of walkabouts that capture resident/family communication.

## Target for process measure

• 80% of assigned walkabouts will have resident/family communication captured.

# **Lessons Learned**

By quarter 3, 85% of manager walkabouts including resident and family communication.

	Last Year		This Year	
Indicator #11	46.40	48.40	39.90	NA
Percentage of respondents who responded "Always" to the	40.40	40.40	59.90	
following question How often did staff listen carefully to you?	Performance	Target	Performance	Target
(Hogarth Riverview Manor)	(2023/24)	(2023/24)	(2024/25)	(2024/25)

## Change Idea #1 🗹 Implemented 🛛 Not Implemented

Managers to encourage and strategize with staff on how to regularly engage and communicate with residents.

#### **Process measure**

• Percentage of huddles where managers remind staff to listen to residents and involve them in their own care during attended huddles. Tracking to start April 30, 2023.

#### Target for process measure

• Managers will remind staff of listening and involving residents in their own care during at least 80 percent of huddles.

## **Lessons Learned**

100% of huddles include discussion around engaging and communicating with residents.

Safety | Safe | Custom Indicator

	Last Year		This Year	
Indicator #4 Number of workplace violence incidents reported by workers	100	100	121	NA
(as defined by OHSA) within a 12 month period. (Hogarth Riverview Manor)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

# Change Idea #1 ☑ Implemented □ Not Implemented

Implement Dementiability training for Therapeutic Recreation (TR) staff.

#### **Process measure**

• Percentage of TR staff trained by September 2023

## Target for process measure

• 80% of identified staff complete Dementiability training

# **Lessons Learned**

100% (31) of therapeutic recreation staff have received training

Change Idea #2 ☑ Implemented □ Not Implemented

Manager discussions continue during white board huddles and manager walk about, where staff are asked "what has made them feel unsafe in the past 24 hours". Managers also focus discussions on re approaching residents who are exhibiting responsive behaviours towards staff.

## **Process measure**

• Percentage of huddles where managers discuss approaches to Responsive Behaviours

## Target for process measure

• Have manager responsive behaviour discussion at 80% of all huddles starting May 2023

# **Lessons Learned**

By quarter 3, 100% of huddles address responsive behaviour concerns.

# Comment

Current performance Jan to Dec 2023