## 2022/23 Quality Improvement Plan - Hogarth Riverview Manor "Improvement Targets and Initiatives"



St. Joseph's Care Group 35 North Algoma Street Box 3251, Thunder Bay , ON, P7B5G7

024 Strategic Plan	Quality dimension	Measure/Indicator	Туре	Unit / Population	Source / Period	Current performance	Target	Target justification	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
Priority	Service Excellence	Do residents feel they can speak up without fear of consequences?	Priority	Hogarth Riverview Manor	In house survey		Collect Baseline	First year for data collection	1. The Home will implement a new position to support families, particularly if there are care concerns. 2. A family support group will be re-initiated. 3. Engage with Compassion Research Lab to identify potential measures and/or interventions recompassion at front-line.	connect them with the appropriate team member.  2. Re-start Family Support Group and share "What's Next" resource	1. Position is filled 2. Support Group is Implemented 3. Clear decision re: go/no go and, if going ahead, at least one unit is identified as a pilot.	1. Filled 2. Support Group is initiated by October 2022 3. If home decides to go ahead with compassion lab tools, one unit has implemented by March 2023.	
	Service Excellence	How often did staff involve you in planning your (or your family member's care)? Always	Custom	Hogarth Riverview Manor	In house survey	36.5	38	Increase current performance by 5%	0 ,	and the new Family Engagement Liaison to share information and give residents and families a chance to share needs prior to move-in.  2. Social Work will call family first full day in the home to see how first day went and to identify	1. Percentage of new admissions who receive pre-admission meeting 2. Percentage of families of newly admitted residents who get phone call day after admission.		
	Service Excellence	How often did staff listen carefully to you? Always	Priority	Hogarth Riverview Manor	In house survey	44.1	45.0	Increase current performance by 2%	Make staff members aware of call bell response time through tracking at unit level.     Conduct scheduled leader walkabouts		review call bell response time at quality huddle.	1. Three units will have call bell response time as a measure on Quality board in 2022/23 for daily review. 2. Manager - each unit once per month; Directors - two units per month; VP - one unit per	
	Safe & Effective Care	The proportion of residents with a progressive, life-limiting illness, that are identified to benefit from palliative care, who subsequently have their palliative care needs assessed using a comprehensive and holistic assessment.	Custom	Hogarth Riverview Manor	Local data/Oct to Dec 2021	43	80	Improve current performance	identify individuals who would benefit from a palliative assessment and ensure this is completed.	RAI Coordinator will report all quarterly PPS due dates to clinical team and will follow up with team if not completed  Once assessment is complete, team will identify appropriate interventions. As well, materials recently developed with help of the Regional Palliative Care Program will be shared with families.	Percent of residents with a CHESS score 3 who receive palliative assessment	80% of residents with a CHESS SCORE of 3 or more will receive a palliative assessment	

2024 Strategic Pla Priority	Quality in dimension	Measure/Indicator	Туре	Unit / Population	Source / Period	Current performance	_		Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
	Effective	Number of workplace violence incidents reported by workers (as defined by OHSA) within a 12 month period.		Hogarth Riverview Manor	Local data collection / Jan - Dec 2021	205	205	on current performance. Continuing to improve the	Approach (GPA). 2. With enhancement funding, add Therapeutic Recreationists to	Direct care staff (registered and unregistered staff) will be trained in the gentle persuasive approach.     Home will increase TR complement and activities for residents.	of activities offered to residents.	85% of direct care staff will complete education by March 2023     10% increase in number of activities offered in Home	