

## 2023/24 Quality Improvement Plan "Improvement Targets and Initiatives"

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

AIM		Measure								Change					
Issue	Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments	
Theme II: Service Excellence	Patient-centred	Percentage of respondents who responded "Always" to the following question "How often did staff involve you in planning your (or your family member's care)?"	C	% / Survey respondents	In-house survey / 2022-23	Hogarth Riverview Manor	43.1	46.00	Improve current performance	1)Continue pre-admission meetings with resident and families	Family Engagement Coordinator will continue resident and family communication both pre and post admission.	Percentage of pre and post admission meetings/follow up	1 pre-admission meeting per week. 80% of new admissions will receive post admission follow up call.		
										2)Continue monitoring call bell response times	Monitor call bell response times by reviewing call bell response time reports.	Number of call bell reports monitored, posted, discussed, and action taken where needed	26 call bell reports will be pulled, posted, and discussed during huddles throughout the year.		
										3)Increase White board huddle participation growth to families and residents	Residents and Family members will be invited to attend white board huddles	Percentage of huddles where Families and Residents attend whiteboard huddles.	Residents and families will attend 10% of huddles.		
										4)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?	Increase family and resident communication with specific conversation starter questions on the floors during walkabouts.	Percentage of walkabouts that capture resident/family communication.	80% of assigned walkabouts will have resident/family communication captured.		
			Percentage of respondents who responded "Always" to the following question How often did staff listen carefully to you?	C	% / Survey respondents	In-house survey / 2022-23	Hogarth Riverview Manor	46.4	48.40	Improve current performance	1)Managers to encourage and strategize with staff on how to regularly engage and communicate with residents.	During huddles, managers will encourage staff to engage resident participation in decision making in all areas of daily care	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.	Managers will remind staff of listening and involving residents in their own care during at least 80 percent of huddles.	
			Percentage of respondents who responded "Yes, Definitely" to the following question "Do you feel that you can raise a concern about staff without it affecting your (or your family member's) care?"	C	% / Survey respondents	In-house survey / 2022-23	Hogarth Riverview Manor	32.8	34.80	Improve current performance	1)Increase resident and family awareness of Whistle Blower Protection Policy	Whistle Blower Protection will be added as a standing agenda topic for each family and resident council meeting. Include whistle blower protection and the steps for raising concerns as a regular addition to the monthly newsletter.	Whistle Blower Protection added as standing agenda item to council meetings. Number of monthly newsletters that include information about Whistle Blower Protection	By April 30, 2023 implement as a standing agenda item 8 monthly newsletters will include Whistle Blower Protection Information	
	2)Increase resident and family awareness and access of Clinical Resource Coordinator (CRC) and Resident & Family Experience Coordinator	Include information about CRC and Resident and Family Experience Coordinator in monthly newsletter and at time of admission.									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	Content will be added by April 30, 2023			
	3)Strengthen processes to support Indigenous clients to report a concern	Collaborate with Indigenous Health Team to identify process improvements.									Identify process improvements and implement.	Process improvements implemented by July 31, 2023			

AIM		Measure								Change				
Issue	Quality dimension	Measure/Indicator	Type	Unit / Population	Source / Period	Organization Id	Current performance	Target	Target justification	Planned improvement initiatives (Change Ideas)	Methods	Process measures	Target for process measure	Comments
Theme III: Safe and Effective Care	Safe	Number of workplace violence incidents reported by workers (as defined by OHSA) within a 12 month period.	C	Count / Worker	Local data collection / Jan to Dec 2022	Hogarth Riverview Manor	100	100	Maintain current performance to sustain improvement from previous year.	1)Implement Dementiability training for Therapeutic Recreation (TR) staff.	All TR staff will receive training	Percentage of TR staff trained by September 2023	80% of identified staff complete Dementiability training	Currently all staff attend Gentle Persuasive Approach (GPA) training. Will continue to ensure GPA training is offered to all new staff and that existing staff receive the required retraining.
										2)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.	Managers attend whiteboard huddles and conduct regular walkabouts	Percentage of huddles where managers discuss approaches to Responsive Behaviours	Manager responsive behaviour discussion at 80% of all huddles starting May 2023	