# LTCQUALITY ANNUAL REPORT 2022

# **Table of Contents**

Quality Matters	1
Quality Improvement	
Plan	2
Monitor and Measure	3
Surveys	4
Our Leadership Team	5
Designated Leads	6
Continuous Quality	
Improvement Initiatives	7
Closing remarks	8

# **Quality Matters**

Our two long-term care (LTC) homes, Saint-Louis Residence (SLR) and Élisabeth-Bruyère Residence (ÉBR), operate under Bruyère Continuing Care. Driven by learning, research and innovation, our mission is to lead an integrated system of care that maximizes quality of life and health potential. Quality and service excellence is one of five strategic pillars as part of our goal to be recognized as a national leader in the delivery of quality care.

Our LTC Quality Committee reports to the Quality Management and Mission Effectiveness Committee of Bruyère's Board of Directors. As part of this committee, designated leads meet on a quarterly basis with the main functions and responsibilities highlighted below.

- Assist in the development and monitoring of our annual Quality Improvement Plan and its objectives.
- Review, assess and monitor our homes' priority areas, objectives, policies, procedures and protocols.
- Prioritizes continuous quality improvement priority areas.
- Monitors and measures progress.
- Identifies and provides guidance on implementing adjustments, including around communicating outcomes.
- Reviews the resident quality of life survey and the engagement survey results and reviews the actions proposed to improved the care, services, programs and goods based on the results and other recommendations.

### Bruyère Continuing Care's Board of Directors

Board of Director's Quality Management and Mission Effectiveness Commitee

Long-term Care
Quality Committee

Corporate Quality
Committee

# **Quality Improvement Plan**

Our long-term care homes' Quality Improvement Plan (QIP) is prepared annually based on priorities and recommendations as per:

- Health Quality Ontario's recommended key quality indicators and data
- The LTC Quality Committee
- Bruyère's strategic objectives
- Resident and Family survey results
- Resident and Family councils' feedback
- Stakeholders' feedback (e.g., Ministry of Long-Term Care, external partners, etc.)
- Etc.

The QIP is submitted to the board's Quality Management and Mission Effectiveness Committee for review. Each home's administrator approves our yearly QIP. You will find below the priority indicators for each home.



**Resident Experience:** Percentage of residents responding positively to: 'Staff ask how to meet my needs'



**Falls:** Percentage of residents who fell during the 30 days preceding their resident assessment



**Pressure ulcers:** Percentage of residents who developed a stage 2 to 4 pressure ulcer or had a pressure ulcer that worsened to a stage 2, 3 or 4 since their previous resident assessment



**Palliative care:** Percentage of residents who deceased with documented goals of care

### **Monitor and Measure**

Bruyère's Decision Support Services track our quality indicators on a monthly basis. Quarterly, they present the results through a dashboard used to monitor and measure progress. This dashboard is reviewed, at a minimum, at every LTC Quality Committee and other Bruyère committees, like the Senior Operations Team.

The LTC Quality Committee identifies and makes recommendations to implement adjustments.

Our yearly targets for our priority quality indicators are determined based on several factors, including:

- Provincial data as per Canadian Institute for Health Improvement and Health Quality Ontario
- Historical performance
- Other corporate data and strategic objectives
- Recommendations from key stakeholders
- Recommendations from the LTC Quality Committee

The communication of the outcomes for our quality indicators and continuous quality improvement initiatives are tailored to the initiative. Channels include:

- Townhall-style staff meetings
- Quality Matters Boards on the home areas
- Resident and Family Council meetings
- Staff and resident/loved ones newsletters

21/22 Targets (%)	Resident Experience	<b>デル</b> Falls	Pressure ulcers	Palliative care
Saint-Louis Residence	51	15	3	60
Élisabeth Bruyère Residence	<b>51</b>	15	3.5	60

# **Surveys**

### **Resident Survey**

We conduct resident quality of life surveys with, at least, 50 residents, on a yearly basis, with the validated interRAI Quality of Life Survey. We are part of a consortium of LTC homes named Senior Quality Leap Initiative. This allows us to benchmark against peers.

In 2021-2022, our resident survey was conducted between October and December 2021. 51 residents responded at both homes combined.

Å	Saint-Louis Residence	Élisabeth Bruyère Residence
Percentage of residents who responded positively to 'I would recommend this home or organization to others'	<b>62</b>	64
Percentage of residents responding positively to: 'Staff ask how my needs can be met'.	<b>51</b>	36

### Family Engagement Survey

We conduct our family engagement survey on a yearly basis. In 2021, we received 50 responses for SLR and 29 for ÉBR.

	Saint-Louis Residence	Élisabeth Bruyère Residence
Percentage of respondents who answered positively to 'Would you recommend this home to another family member or friend if they needed to come to a long-term care home?'	93	<b>79</b>

Survey results are communicated to key stakeholders, including residents, their loved ones, both councils, and staff members within six months of survey.

# **Our Leadership Team**



**Melissa Donskov** 

Vice-President, Residential and Community Care and Programs Administrator, Saint-Louis Residence



**Chantale Cameron** Administrator, Élisabeth Bruyère Residence



**Annic Deguire**Director of Care, Saint-Louis Residence



Anne-Laure Grenier
Associate Administrator, Saint-Louis Residence
Manager, Quality and Residence Experience, Long-term Care



**Widy Larocque**Director of Care, Élisabeth Bruyère Residence



**Thierry Séreau**Director of Care, Saint-Louis Residence



**Jocelyn Wiens**Associate Director of Care, Long-term Care

# **Designated Leads**



**Gino Catellier**Facilities lead, SLR

**Bijan Solaimany** Facilities lead, ÉBR



Diane Arsenault Macdonald
LTC Food Services lead



Bernard Lalonde
LTC Housekeeping lead



Philippe Fournier IPAC lead, SLR

Simi Jacob IPAC lead, ÉBR



**Giovanni Bonacci** Medical Director, SLR Jean Chouinard Medical Director, ÉBR



Anne-Laure Grenier LTC Quality lead



Kim Durst-Mackenzie
LTC Recreation lead



Rebekah Hackbush LTC Spiritual lead

# Continuous Quality Improvement Initiatives

The initiatives highlighted below are some of the continuous quality improvement initiatives undertaken at our two long-term care homes this past year. Each of them fits within two or more of Bruyère's strategic objectives.

What? Renovation of our 4C home area to create a third secure community at Saint-Louis Residence.

When? Opened in January 2021.

Why? To create a person-centred small community home area and respond to the heightened need for secure beds within our community.

What? Strengtening of our Designated Care Partner Program (essential caregivers).

When? Ongoing

Why? Caregivers are an essential and valued part of resident care and enhance our residents' experience. This program ensures residents can benefit from their caregivers at all times, including during outbreaks.

What? Enhancing our infection prevention and control program and practices through increased audits, training, etc.

When? Ongoing

Why? To protect everyone living, working or visiting our homes and meet Ottawa Public Health and Ministy of Long-Term Care requirements.

What? Living classroom Personal Support Worker program students at Saint-Louis Residence

When? Four cohorts between May 2021 and June 2022

Why? In collaboration with La Cité, this innovative program prioritizes the education and recruitment of health care workers. This investment in a better future for the sector's workers strengthens long-term care and, in turn, residents' quality of life.

What? Olympic Games: Preventing Falls Olympics at Saint-Louis Residence

When? Summer of 2021

Why? Peer recognition initiative to reduce and prevent resident falls and promote engagement through a multidisciplinary approach.

# **Closing Remarks**

The past two years have been marked with challenges, but also with exciting progress like funding towards four hours of care as well as the new Fixing Long Term Care Act (FLTCA).

Our two long-term care homes' priority areas, including enhancing relevant objectives, policies, procedures and protocols, for the next year include:

- Increase towards four hours of care, including enhancing recruitment and retention.
- Enhanced LTC Continuing Quality Improvement committee and requirements.
- Meeting the new requirements under the FLTCA like:
  - Integrating a palliative care program and philosophy.
  - Enhancing our education program, including around the expanded resident rights and the requirements for physician training.
- Accreditation through Accreditation Canada (visit scheduled in April 2023).
- Continuing the optimization of our medication administration program, including the requirements under the Ontario Strengthening Medication Safety in Long-Term Care Home Initiative.

As we weather the next waves of the COVID-19 pandemic, I know our teams will continue demonstrating resiliency and excellence to meet our set objectives. I am proud of the work we have accomplished so far and I am looking forward to the next year as we make our LTC homes even better places to live and work.



### **Melissa Donskov**

Vice-President, Residential and Community Care and Programs
Administrator, Saint-Louis Residence

8