



Centennial Place LTCH

July 2024 Continuous Quality Improvement (CQI) Report

2 Centennial Lane North
Millbrook, ON L0A 1G0
(705) 932-4464

Designated Lead for Continuous Quality Improvement (CQI) Initiative:
Courtney Jilesen, Administrator

Continuous Quality Improvement Initiative Report

Overview

Centennial Place is a 128 bed Long-term care home owned and operated by AON Inc. As reflected in our Mission, Centennial Place is “dedicated to creating a New Tradition of Long-term Care by combining a comfortable environment with flexible programs tailored to individual needs. We provide a home-like environment that promotes the maximum independence, dignity, safety, and wellness of every one of our residents.” Our Mission and Values are brought into action through innovative design and furnishings, through staff selection and training, through clean and well-maintained environments, and programming that respects residents’ individuality while promoting independence.

“Innovative design” is the starting point for creating a home-like environment. For example, to promote a peaceful atmosphere, Centennial Place has carpeted hallways and no overhead communication system. The furnishings and décor are tasteful and appeal to local preferences. Meals are prepared onsite, with fresh local ingredients and menus developed with resident input. Private dining is available in each Home-Area to promote family interaction and to create

opportunities for residents and families to celebrate special events together.

At the core of our approach to programming is resident “choice”. This is codified in the Fixing Long-Term Care Act (FLTCA) and Centennial Place has always operated this way. This means offering options to residents and giving them the opportunity to have some control over their lives and their routines. It incorporates a focus on wellness and restorative programs, as well as such things as flexible waking times, input on menu and meal choices, and having a say in what programs are offered. Staff receive training on adult Montessori concepts and how to enhance resident independence and dignity. Community events are frequent and varied, with the goal being to ensure that residents have lots to choose from and that their lives can remain purposeful and satisfying. Centennial Place is accredited with the Commission on Accreditation of Rehabilitation Facilities (CARF) since 2019. Previous to CARF we were accredited with Accreditation Canada.

As part of a comprehensive and integrated process that includes input from annual program evaluations, annual strategic planning at a corporate level, a review of performance and outcomes using provincial and local data sources (including “Your Health System” through the Canadian Institute for Health Information), and review of priority indicators released from Ontario Health, we have identified improvement opportunities and set improvement objectives for the year.

Priority Areas for Quality Improvement

In addition to quality of life, promoting resident safety is at the foundation of what we do. As a result, the goals of this Continuous Quality Improvement Plan align well with Centennial Place’s Mission. We are basing this plan on our Quality Improvement Plan (QIP) that is submitted annually to Health Quality Ontario. Therefore, based on the parameters of the province wide QIP process and the desire for common indicators that suggest performance improvement, we will focus our attention to:

- Maintain or decrease our number of potentially avoidable emergency department transfers;
- Continue to receive positive responses to resident satisfaction surveys,

particularly responses to: “Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?"”, and “Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences"”;

- Percentage of LTC home residents who fell in the 30 days leading up to their assessment; and,
- Percentage of LTC residents without a diagnosis of psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.

Indicators and Goals

1. Number of Emergency Department (ED) visits for modified list of ambulatory care–sensitive conditions per 100 long-term care residents (list is per the Ontario Health Indicator Technical Specifications, 2022-2023 Quality Improvement Plans). We are currently 17.68, the provincial average is 20.83 and our goal for this indicator is 17%. We will continue with current strategies to reduce ED visits that are avoidable.
2. Positive responses on resident satisfaction surveys: we scored 98% in this measure in 2023. For 2024, we are looking to improve on our process by offering an online survey through Survey Monkey, with paper versions available for those who do not have access to the Internet or would simply prefer this method. The process has been overhauled and all questions reviewed on our satisfaction surveys at the senior management level and our intent is to have good data throughout 2024 to help us improve the quality of care and services that we provide to our residents.
3. Percentage of residents who fell in the 30 days: we have several measures in place to attempt to reduce injuries from falls, which is our overarching goal, knowing that the population whom we serve will continue to fall based on their individual diagnoses, dementia in particular. Our current rate for falls is 19.72% - this is 4.32% worse than the Ontario average. Although our fall indicator is high, our rate of injury resulting from fall remains low.
4. Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment. Our current performance for this indicator is 20.57%, with the provincial average at 20.55%. Our goal is 18%. The resident population continues to have more dementia/Alzheimer’s diagnosis predominantly for admission into our home. We continue with current strategies to minimize the use of antipsychotics medications unless medically appropriate.

Survey Required Under Section 43 of the FLTCA

- The resident / family satisfaction survey is carried out per policy GA-F-40 (Resident/Family Surveys) as part of the home's Continuous Quality Improvement program. Surveys are provided to residents / SDM's prior to individual care conferences and collected and summarized by the Director of Resident & Family Services monthly and then annually.
- The results of the last year's survey are as follows:

Centennial Place Survey 2023

| Survey Questions | % Satisfied |
|---|-------------|
| 1. Activities of daily living which include routines the resident engages in to meet basic needs (eg. walking, eating, toileting, grooming) are carried out according to resident's wishes. | 94% |
| 2. Medical and care concerns are dealt with efficiently and to resident's satisfaction. | 98% |
| 3. Is resident able to participate in making decisions regarding food choices/preferences? | 98% |
| 4. Meals and snacks provide satisfactory nutrition, taste, presentation, temperature and choice. | 97% |
| 5. Activities and social programs are available and offered to respond to the resident's needs and interests on different days and times as appropriate. | 97% |
| 6. Housekeeping, laundry, and maintenance services meet the needs of the resident. | 97% |
| 7. The building and its facilities are clean, comfortable, and meet the needs of the resident. | 99% |
| 8. Staff are available, courteous, helpful, friendly, compassionate, provide privacy, and are caring. | 99% |
| 9. Problems and concerns are given serious and prompt attention, and make the resident feel like they have a voice. | 98% |
| 10. Financial and administrative matters are conducted professionally and with respect for the resident and his/her family or representative. | 98% |
| 11. If you experience pain or discomfort, are you satisfied with how that pain or discomfort is being treated? | 98% |
| 12. Does resident receive, or have access to, fluids such as water when desired? | 97% |
| 13. Does the resident have any oral care or oral hygiene problems? | 97% |
| 14. Centennial Place provides the overall quality & service I / We expect | 99% |
| TOTAL OVERALL | 98% |

- The results of the survey are communicated to residents and their families and staff of the home by being posted in a conspicuous space on the "Resident and Family Council" bulletin board on the ground floor across from the elevators.
- As surveys are provided prior to Care Conferences, individual issues are

addressed in this forum.

- Any scores on surveys that are below “Satisfied” are sent to the appropriate Manager for follow up by the Director of Resident & Family Services.
- Through our regular Continuous Quality Improvement meetings, our priority areas for quality improvement (above) are reviewed and should any actions / implementations occur, they will be recorded in these meeting minutes.
- Any follow-up on these items will be posted / dated on the same bulletin board as above.
- No systemic issues were reported to us, with items that required follow up having to do with issues specific to individual residents.
- We are changing to an online survey for residents and family members to complete, which will be done annually beginning in 2024. Paper copies have been made available for residents or family members who wish to complete their surveys in this fashion.

Oversight

The Continuous Quality Improvement Committee oversees all aspects of our QIP and has identified change ideas that will be tested and implemented in collaboration with staff, physicians, and other key stakeholders. Our existing CQI processes will be used to monitor and measure progress, identify and implement adjustments and communicate outcomes for the home’s priority areas for quality improvement as part of this Report.

Sharing and Reporting

A detailed QIP, including Narrative and Workplan, is available on Ontario Health’s QIP publicly accessible pages. A copy of this report was shared with our Residents’ Council President and will be reviewed at their next meeting July 15, 2024.