

Focus the system
on a common
quality agenda

Catalyze
Spread

Build
Evidence &
Knowledge

Broker
Improvement

Evaluate
Progress

Quality Improvement Plans in Long-Term Care

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OLTCA Symposium - October 28, 2014

Session Objectives

- Define the components of a QIP
- Identify current LTC priority quality indicators
- Illustrate how to make QIPs work for LTC homes
- Practical ideas for preparing the home staff for change
- Examine the engagement and allocation of resources in the home to better support a quality-focused culture
- Provide an overview of the HQO LTC QIP Supports

Agenda

- Overview of Quality Improvement Plans
- Priority Indicators for LTC
- Case Study
 - Build the Case for Change
 - Governance Structure
 - Teams of Traction
 - Quality Improvement Framework
 - Continuous Improvement
- Wrap up
- Resources and Supports

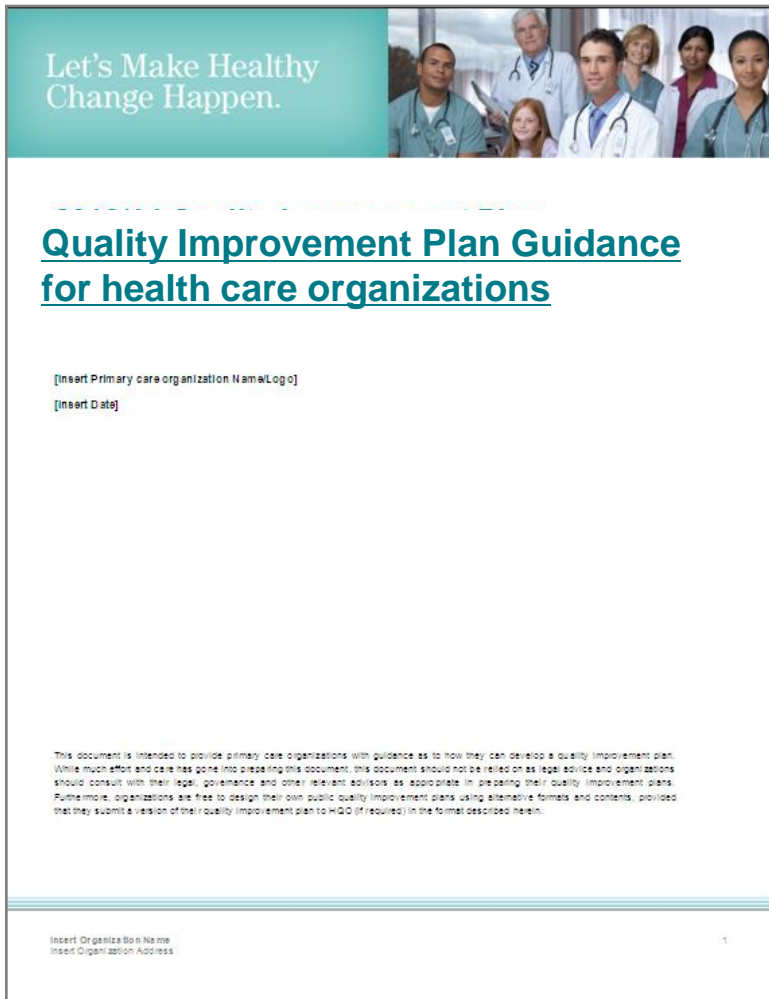
Overview Of QIPs

Quality Improvement Plans

- QIPs play a pivotal role in improving the quality of care that is delivered in Ontario. They allow organizations to:
 - Formalize your quality improvement activities, articulate your goals, and identify concrete ways of achieving those goals
 - Communicate your ongoing commitment to delivering high quality care and demonstrate your dedication to the transformation of Ontario's health system
- Quality improvement requires continuous improvement. The QIP is not an annual plan. Rather, it is a working, living document that evolves throughout the year and year-after-year.

Source: Health Quality Ontario (2014). *Hospital Quality Improvement Plans: An Analysis for Improvement*, retrieved from: <http://www.hqontario.ca/Portals/0/documents/qi/qip-analysis-hospitals-2013-en.pdf>

A common, integrated guidance document



- Common guidance harmonizes dialogue across sectors
- Common core metrics described along with sector specific priorities to better understand how each sector ‘fits’ in the dialogue
- Key best practices showcased to advance provincial priorities
- Accompanied by a **Technical Specifications document** that specifies priority indicators for each sector

Retrieved from: http://health.gov.on.ca/en/pro/programs/ecfa/legislation/quality_improve.aspx

Components of the Quality Improvement Plan

1. Narrative

2. Workplan

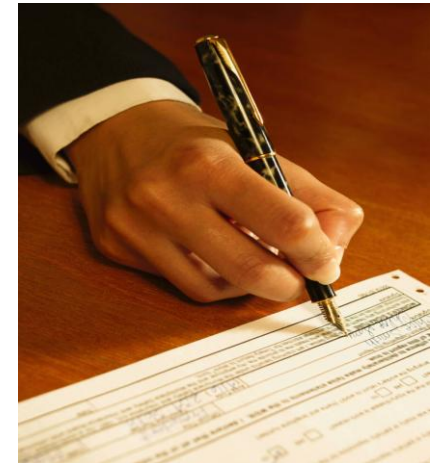
3. Progress Report (optional this year)

**Each facility to submit a QIP to HQO by
April 1st, 2015 via the Navigator**

The Narrative: Importance of Context in QI

- Overview
- Integration & Continuity of Care
- Challenges, Risks & Mitigation Strategies
- Information Management
- Engagement of Clinicians & Leadership
- Accountability Management
- ***Patient/ Client/ Resident Engagement**

Sign off: *Administrator/ED, Quality Chair.*



The Workplan: Overview

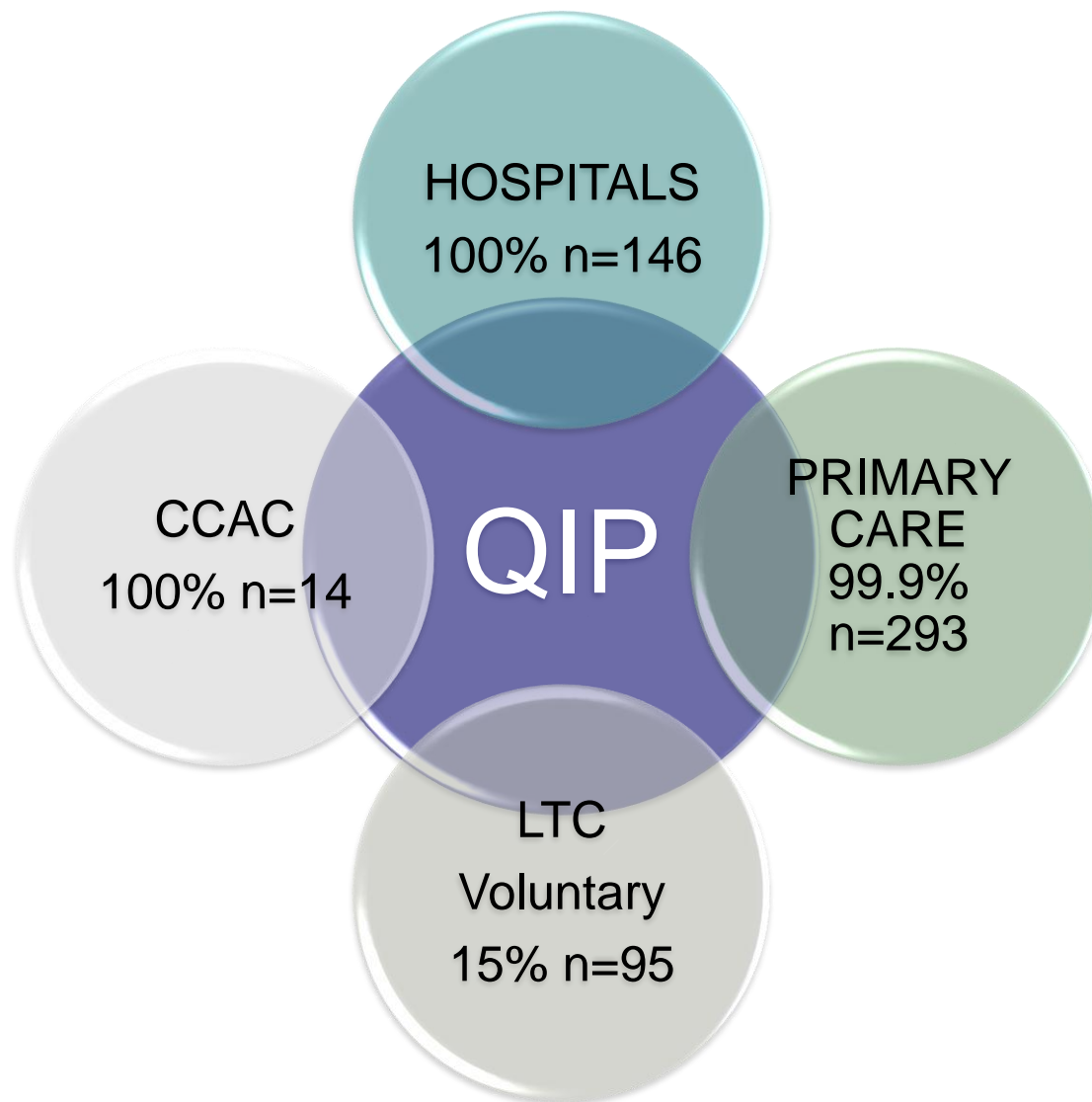
- Describes current performance, improvement targets and initiatives
- Designed to align with the Model for Improvement

Organization:

 EXPORT WORKPLAN

ID	AIM		MEASURE					CHANGE					
	OBJECTIVE	MEASURE / INDICATOR	UNIT / POPULATION	SOURCE / PERIOD	ORG ID	CURRENT PERFORMANCE	TARGET PERFORMANCE	TARGET JUSTIFICATION	PLANNED IMPROVEMENT INITIATIVES (CHANGE IDEAS)	METHODS	PROCESS MEASURES	GOAL FOR CHANGE IDEAS	COMMENTS
SAFETY													
To reduce Falls	Falls: Percentage of residents who had a recent fall (in the last 30 days)	% / All patients	CIHI eReporting Tool / Quarter	54507	20.00	9.00	to match provincial benchmarks as per HCO public reporting	#1) implement falls huddle after each fall	every staff on floor will attend brief fall huddle to discuss circumstances of what happened, led by RN	# of falls huddles per month / # of falls per month	100% of falls have a follow up fall huddle completed, implemented by Sept. 2014		
								#2) PT assessment completed for all new residents, or change in status	PT will complete assessment within 4 days of admission, and change in status	# of PT assessments done per month / # of new admits per month, and change in status	90% of new admissions receive PT assessment, by Sept. 2014		
								#3) add lighting to hallways	ES will add lighting to all hallways to improve brightness	# of new lights added / # of affected hallways	100% of flagged hallways will receive new lighting by July 2014		

Highlights: Submissions 2014/15

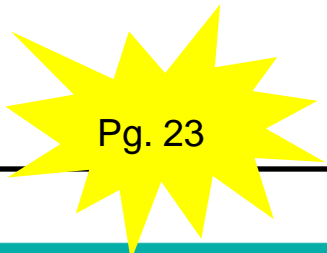


LTC Priority Indicators

Priority Indicators for LTC

1. Falls
2. Pressure ulcers
3. Restraint use
4. Incontinence
5. Resident Experience*
6. ED visits*

Source: [Indicator Technical Specifications \[PDF\]](#)



* homes are encouraged to track ED visits in-house using worksheets and tracking documents (resources have been provided through [Residents First](http://www.hqontario.ca/quality-improvement/long-term-care/tools-and-resources) (<http://www.hqontario.ca/quality-improvement/long-term-care/tools-and-resources>), as well as through the [INTERACT](http://interact2.net) (Interventions to Reduce Acute Care Transfers) program (<http://interact2.net>)

IV. Long-Term Care Home QIP Indicators

Priority LTC Home Indicators

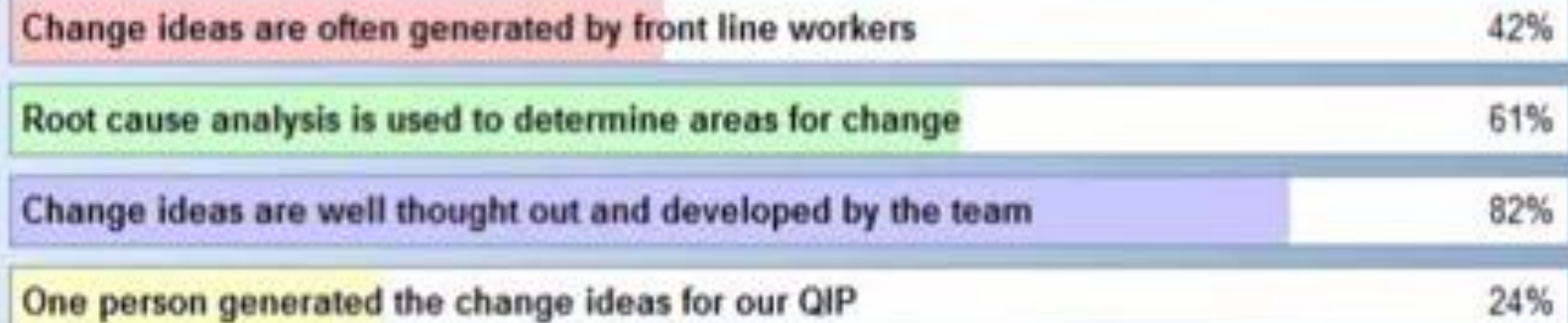
The Ministry understands the importance of including abuse/neglect and quality of life/resident & family experience indicators in the QIP process and is working with the sector to develop these indicators for future implementation.

Indicator	Falls This is a priority indicator for 2014/15 <i>Quality dimension: Safety</i>
Definition	Percentage of residents who had a recent fall (in the last 30 days)
Additional specifications	This indicator is consistent with HQO's public reporting. See HQO's Public Reporting website for more information on this indicator.
Reporting period	Q2 13/14 (Jul to Sep)
Data source	Suggested data source: CIHI CCRS eReports - unadjusted rates
How to access data	CIHI CCRS eReports

QUICKPOLL

3 When developing change Ideas which of the following statements apply to your LTC home, please choose all that apply:

Poll Results (multiple answers allowed):



Excerpt from LTC QI Staff

What advice would you give others who will be developing their QIP for April 2015/16?

- **“Our biggest learning was how important it is to make sure the data you use is accurate data.”**
- **“put together a motivated team, meet monthly to report progress, start QIP review as soon as you submit, start early, start small, go slow, don't stop”**

Source: HQO Webinar July 31st, 201410

Case Scenario

Wrap up

Tips For Keeping Your QIP Alive

- **Engagement**
 - Start early engaging staff in QIP development.
 - Get feedback on the ideas and whether they seem “doable” or “reasonable”
 - Think about how you can engage patients/clients/residents
- **Dedicate QIP space/time**
- **Ongoing communication, regular monitoring and reporting, including residents and frontline staff through to the board/leadership**
- **Talk with other organizations within and across sectors about their change ideas and discover opportunities to collaborate**
- **Celebrate success!!!!**

HQO Supports

- **Residents First information on HQO website**

<http://www.hqontario.ca/quality-improvement/long-term-care>

✓ RF Posters & RF Change Packages

✓ LTC Quality Improvement Guide

<http://www.hqontario.ca/Portals/0/Documents/qi/qi-ltc-improvement-guide-en.pdf>

✓ Quality Improvement Plans in Long-Term Care: Lessons Learned

<http://www.hqontario.ca/Portals/0/Documents/qi/rl-qip-lessons-learned-en.pdf>

- **QIP Analysis** reports:

<https://qipnavigator.hqontario.ca/Resources/Resources.aspx>

- **Quality Compass:** <http://qualitycompass.hqontario.ca/>

- **QIP inbox:** QIP@hqontario.ca

- **QIP Navigator:** <https://qipnavigator.hqontario.ca/>





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