



## Continuous Quality Improvement Initiative Report 2024-2025

### **Overview**

Millennium Trail Manor is a 160 bed long term care home that is part of the Conmed Health Care Group and is fully accredited by Accreditation Canada. Located in Niagara Falls, Ontario, we will celebrate our 20th anniversary in the fall of 2024. Our home consists of 3 floors with 5 resident home areas. We are committed to providing resident centred care through an interdisciplinary approach, and both residents and families take an active part in developing needs-based resident care plans.

### **Mission, Vision, and Values for Resident Focused Care**

#### ***Mission***

We are a community of individuals who believe that a supportive and nurturing environment creates a framework for accepting respect and opportunity for personal growth. This community "spirit" supports a sensitivity towards the variables of or spiritual and cultural diversity, works in combination with our holistic approach to care, and contributes to our unique perspective. This dignified and safe place that we call Home.

#### ***Vision***

We strive to share our successes, grow from our challenges and embrace our differences. We believe that teamwork is the key to provide quality care, and allows us to opportunity to assist our Residents to achieve their optimum level of wellness.

#### ***Value***

We believe that people are our greatest asset- residents, families, and staff so we follow the

### **RIGHT WAY**

R- Resident Centered Care

I - Integrity

G - Growth

H - Honour

T- Teamwork

W- Workplace Health and Safety

A- Always confidential

Y- You Matter

### ***Priority Areas for Quality Improvement***

April of 2022 saw the adoption of the Fixing Long Term Care Act which implemented new legislation that focused on improving Resident care through a resident-centred



Continuous Quality Improvement Initiative Report 2024-2025 approach based on best-practice. In conjunction with key stakeholders, the home has identified areas of improvement to contribute to planning CQI initiatives using the following guidelines:

- Fixing Long Term Care Act (FLTCA)
- Registered Nurses Association of Ontario Best Practice Guidelines (RNAO BPG)
- Key Performance Indicators (CIHI, PCC)
- Program Evaluations
- Health Quality Ontario Priority Indicators
- Internal Audits
- Resident and Family Satisfaction Surveys
- Feedback from stakeholders including Resident and Family Councils

Millennium Trail Manor develops and implements a Quality Improvement Plan (QIP) annually to align with initiatives through Health Quality Ontario (HQO) for timely and efficient care, Patient/Client/Resident/Provider experience, and Safe and Effective Care. The Quality Improvement Plan for the 2024 – 2025 year has identified the following priorities for improvement:

- 1) Reduce the number of potentially avoidable Emergency Department visits
- 2) Provide 100% of staff with education in equity, diversity, inclusion, and anti-racism education
- 3) Improve the rating of “What number would you use to describe how well staff listen to you?” and “I can express my opinion without fear of consequences”
- 4) Reduce the number of residents who have developed a stage 2 to 4 pressure injury
- 5) Reduce the percentage of residents who are experiencing worsening pain
- 6) Reduce falls
- 7) Reduce the number of residents without psychosis who are given antipsychotic medication

The QIP is developed with the input of Staff, Residents and Families and align with the home’s goals to improve quality of care and deliver exemplary services. The goals and change ideas from our plan continue as a multi-year program while the home strives to attain its objectives.

### **Performance Monitoring and Measurement**

Millennium Trail Manor’s quality initiative is supported by the home’s measurement and accountability system. Front Line Staff, Managers, and Leadership Staff rely on access to real time data which is integrated into our regular quality and risk management review processes. Such processes include:

- Performance indicators tracked and the home level and program level



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- Priority indicators outlined in the Annual Quality Improvement Plan
- Municipal/Provincial benchmark indicators
- Quarterly CQI meetings
- Resident Council and Family Council
- Resident and Family Satisfaction Survey

Millennium Trail Manor CIHI Performance Indicators 2024-2025

Quality Indicator	Ontario	Millennium Trail Manor
Antipsychotic use without diagnosis	20.40	21.5
Falls in the last 30 days	15.40	22.98
Restraint use	2.2	1.59
Worsened pressure injuries	3.4	4.94
Worsening pain	9.6	11.68
Worsened depressive mood	20.5	38.45
Data Source: CIHI		

**Communication Strategy**

Communication with our stakeholders, community partners, residents, families, and staff is a vital part of our QIP. These groups play a vital role in both the improvement of our home and in sharing the joys of our successes. We distribute monthly newsletters, post memos and posters in the home, email, send out Clinconex message bulletins, gather with our Resident and Family councils, host town halls and staff meetings, and our families take an active part in our interdisciplinary care conferences. We rely on the valuable input from this collaboration in order to reach our common goal, which is to improve the quality of care for our residents.

**Quality Improvement Initiative 2024-2025**

Based on feedback, assessment, and identification of areas for improvement, Millennium Trail Manor implemented the following QI initiatives for 2024:

- Increased hours for staffing in the nursing department enhanced support for our residents to ensure the greatest level of care
- A full time Nurse Practitioner was added to the management team in 2024
- A full time Behavioural Support Manager was added to the management team in late 2023, which is the embedded Behavioural Support Ontario (BSO) Recreation Therapist resource who is an employee of the home but receives training and support from BSO
- Welbi documentation system was implemented for the Recreation Department in 2023 allowing Recreation staff to track data on program participation in order to increase attendance and greater meet resident needs
- Participation in ISMP to ensure indication based prescribing of medication



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- Ongoing review of CIHI for key indicators to strive to meet or exceed provincial average
- Implementation of a dedicated skin and wound nurse in order to assist and educate staff with wound care
- New flooring was installed throughout the home in the hallways and common areas. The flooring in the 3<sup>rd</sup> floor dining room to be replaced in 2024 with a goal to replace the dining room flooring on the 2<sup>nd</sup> floor in 2025
- Replacement of all bedside tables in the home
- 3 new bath tubs have been ordered to replace older equipment in the home
- Room audit process has been developed in conjunction with Department Heads in order to address any maintenance or housekeeping deficiencies in the home
- New benches have been purchased to allow residents to sit outside and enjoy the fresh air
- In 2023, new initiatives through the Registered Nurses Association Clinical Pathways have been implemented to improve the admission process, ensure early identification of Delirium, and for Resident and Family Centred Care. In 2024, the home will implement Clinical Pathways for Falls and Pain

### Looking Ahead: Priorities for 2024-2025

- Implement increase in staffing levels by end of Q4
- Increase emphasis on staff wellness and avoiding burnout and pandemic fatigue
- Utilize services of NP to reduce ED visits
- Replace all resident bathroom cabinets by end of Q4
- Resident lounge areas to be redecorate in themes chosen by Resident Council
- Aim to have 100% of staff trained in GPA by end of Q4
- Continue to implement RNAO Clinical pathways
- Menu is geared toward resident choices and includes seasonal items with an increase in fresh fruits and vegetables
- The home is in the beginning stages of developing a Restorative Program in order to improve resident outcomes

### Home Quality Lean Contact Information

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