

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 28, 2024



OVERVIEW

The MICs Group of Health Services (MICs) is a legal partnership consisting of three partners servicing three different geographically divided communities:

Matheson – Rosedale Center (Bingham Memorial Hospital)
Iroquois Falls – South Centennial Manor (Anson General Hospital)
Cochrane – Villa Minto (Lady Minto Hospital)

Matheson - Rosedale Centre: Our 20-bed ELCAP long-term care home services 6 communities which comprise the Black River-Matheson Township. It is conveniently located within a dedicated wing of the Bingham Memorial Hospital.

Iroquois Falls - South Centennial Manor: Our 69-bed long-term care home is the largest of our MICs homes. Being our only stand-alone LTC home, it is located a few blocks from the Anson General Hospital, within the town of Iroquois Falls.

Cochrane - Villa Minto: Our 37-bed long-term care home which contains five of our newest rooms and activity room extension built in 2016 is conveniently located within a dedicated wing of the Lady Minto Hospital.

The MICs Group of Health Services has recently updated its strategic plan for 2023-2026. Our Organization's Mission is "Partnering to deliver excellent health care for our communities" and our

Vision is “Quality care for everyone always!” The core Value of the organization is reflected in the following: “Caring for Today and Tomorrow”.

MICs Long-Term Care homes value a “Person-Centered” care approach, ensuring we meet health care needs and exceeding expectations of each Resident, rather than focusing on illness. All home operations are developed with Best Practice Guidelines, ensuring safe, organized, inclusive and accessible care for all. The Fixing Long-Term Care Act, 2021, Ontario regulations 246/22 and Ministry of Health & Long-Term Care directives provide the roadmap for legislated organizational standards and requirements. Care plans are developed utilizing comprehensive approaches, respecting the Residents’ Bills of Rights, individual personhood, and medical health history.

Well-being in Long-Term Care is supported through tailored programs in nursing & personal care assistance, skin & wound care, behavioral supports, specialized dementia care, senior mental health, foot care, medication & treatment administration, specialized dietary services, laundry services, social & recreational programs, on-site therapies, restorative care, and in-house medical services.

The Quality Improvement Plan and selected indicators align with our accountabilities to our Residents, our communities, legislation and MICs Strategic Plan. Resident experience, stability, EDIB (Equity,

Diversity, Inclusivity and Belonging), efficiency, and safe care delivery are key priorities in all of the aforementioned plans prompting our organization to put strategies in place to make improvements in these areas of focus.

Quality improvement priorities for 2024-2025 focus on:

Efficiency:

*Reducing the number of potentially avoidable emergency department visits by identifying why ED visits occur for LTC Residents and implementing strategies to mitigate those issues (i.e. Resident falls with injury).

Equitable:

*Ensuring an all-inclusive environment implementing education for staff on equity, diversity, and inclusion and belonging, including anti-racism.

Resident-centered:

*Increasing the avenues in which valuable feedback can be obtained without Residents feeling like they will face consequences for voicing their opinions.

Safety:

*Reducing the amount of antipsychotic medication usage among our resident population

ACCESS AND FLOW

Making sure our Residents receive quality care in the right place at the right time is critical to supporting positive health outcomes and quality experiences. In order to achieve smooth transitions our homes work closely with internal and external partnerships. The need for careful monitoring accessibility and transitions in care for our Residents stem from increased demand on services from an aging population; increased staffing challenges; lack of long term care bed availability; increased Resident complex needs; increased mental health needs and complex dementia care.

To help us identify our challenges, the MICs Group of Health Services monitors:

- *Long Term Care home applications with complex health care needs
- *Audits appropriate documentation and assessment
- *Admission & Discharge ratios
- *Reported critical incidents that result in injury with transfers to the hospital

EQUITY AND INDIGENOUS HEALTH

The MICs Group of Health Services continues to build partnerships in our community to be able to deliver and meet our diverse population's health care needs. We are working together to reinforce health equity and looking at ways to enhance quality across our organization while maintaining culturally, physically and psychologically safe care.

A Diversity, Equity and Inclusion (DEI) committee has been established in the past year. Their focus will be to create awareness and deliver education to our Team Members.

We continue to build relationships with First Nations, Inuit, and Métis organizations and communities. These relationships are founded on respect, accountability and open communication.

Our MICs Group of Health Services indigenous partners include:

Ininev Friendship Centre, Sweetgrass Health Centre, Taykwa Tagamou Nation, Apitipi Anicinapek Nation, Attawapiskat First Nation, Fort Albany First Nation, Missanabie Cree First Nation, Chapleau Cree First Nation , Kashechewan Cree First Nation , Moose Cree First Nation, and Weenuk First Nation

PATIENT/CLIENT/RESIDENT EXPERIENCE

The MICs Group of Health Services is committed to a culture of resident engagement. It is crucial to hear from our resident population to drive quality changes and improvements in the right direction. We welcome any suggestions and feedback to support an environment of high-performing, transcendent, resident-centered healthcare at our long term care homes.

In partnership with Accreditation Canada, resident experience surveys are distributed during quarterly care conferences from the nursing team, and QR codes can be found at the entrance of each home. MICs LTC homes have pushed for growth and development in areas of technological advancement which will continue to enhance our ability to gain Resident and family feedback. RAO Clinical pathway assessment tools are being implemented to afford us the correct information gathering platform which will allow us to safeguard and improve quality standards throughout our long-term care homes.

Residents and their families can also share compliments and concerns at each long term care home via the MICs Group of Health Services' website and Resident Relations Process. Members of the Resident and Family Council continue to meet throughout the year and provide valuable feedback and are involved in quality improvement initiatives for our homes.

PROVIDER EXPERIENCE

Healthcare workers have experienced substantially increased challenges post-pandemic. Fatigue and burnout has contributed to employee retention challenges due to healthcare providers leaving their workplaces and professions.

Maintaining a healthy workforce and retaining current staff is essential to the continuity of high quality services and organizational growth. The MICs Group of Health Services is committed to fostering workplace characteristics including supportive leadership at the Executive and manager levels, continued professional development, effective communication, and collegial relationships amongst front-line Team Members and managers.

SAFETY

During the past year, the MICs Group of Health Services continued to experience challenges with a shortage of Health Human Resources. However, through perseverance, MICs has continued to champion quality improvement efforts and sought to keep key initiatives moving forward despite the challenges.

Even through our struggles we recognized essential key areas of improvement and established quality improvement and organizational growth priorities. MICs understands that prioritizing key areas of focus, developing a plan and re-evaluation throughout the year will ensure success.

Below are a few examples:

- *RNAO Clinical Pathways
- *Implementation of Quality Lead positions
- *Solidifying surveillance auditing systems to maintain and improve resident care
- *Re-established monthly and quarterly reviews consistently with Care RX
- *Providing resident-centered care utilizing a variety of information gathering tools and assessments implemented utilizing best practice guidelines.
- *Partnering with Residents, families, communities and multi-disciplinary teams to bring holistic care approaches

POPULATION HEALTH APPROACH

In August of 2023, the MICs Group of Health Services became a proud partner of the (ÉSO) Équipe de Santé Ontario Cochrane District Ontario Health Team (OHT).

Our top 3 priority populations include:

1. Older adults at risk of or experiencing frailty (ALC/palliative)
2. Mental health and addictions
3. Individuals without primary care providers

With these priority populations in mind, our goal will be to develop a collaborative plan to:

- *Implement an improvement that enhances care planning delivery and outcomes
- *Implement an improvement in care transition experiences
- *Assess and understand available regional best practice models for patient navigation supports, aligned to provincial guidance
- *Implement an improvement for self-management supports

CONTACT INFORMATION/DESIGNATED LEAD

For more information, feel free to contact:

Paul Chatelain, CEO

Paul.Chatelain@micsgroup.com

Isabelle Boucher, Chief Nursing Officer

Isabelle.Boucher@micsgroup.com

Jennifer Emond, Director of Care

Jennifer.Emond@micsgroup.com

SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on **March 28, 2024**

Pat Dorff, Board Chair / Licensee or delegate

Paul Chatelain, Administrator /Executive Director

Pat Dorff, Quality Committee Chair or delegate

Jennifer Emond, Other leadership as appropriate
