

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 21, 2025



OVERVIEW

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Maple Villa is an independent 93-bed licensed long-term care home located in Burlington, Ontario. We are an active community member of the Hamilton Niagara Haldimand Brant Local Health Integration Network and Ontario Health West. Maple Villa has been providing quality resident and family-focused care since 1971. We continually strive to make a difference, to provide Person and Family-centered care and provide services where safety is a priority, in order to meet our current and future needs of our community and exceed customer expectations in the process. Our interdisciplinary team are passionate about the care for our residents, staff, families/caregivers and volunteers and are constantly reflecting on practices and areas of improvement to provide exceptional, individualized, culturally competent care to our residents and maintain a strong and dedicated health care team.

The construction of our new 256-bed home is underway in North Burlington with planned completion in the Spring/Summer of 2026. Over the coming months our team is continuing to develop, review and revise our quality improvement plans as we transition to the new location.

Maple Villa has voluntarily worked with Accreditation Canada with their continuous assessment program for the past 50 years to advance quality and safety in our organization. The partnership between our home and Accreditation Canada focuses on making a positive impact on all our residents, care partners, volunteers, staff, families. This partnership is also recognized by the Ministry of Long Term Care and supports the same principles that are expressed by

the Fixing the Long Term Care Homes Act, 2021. In October 2024 we received Accreditation with Accommodation.

Maple Villa is pleased to provide our 2025/26 Quality Improvement Plan (QIP) that aligns with our Mission, Vision & Values, Accreditation Canada and Health Quality Ontario. We have set goals that focus on system level priority issues of access and flow, equity, experience, and safety. Rather than indicators, we can focus our quality improvement activities to those areas where quality gaps exist and positively shift from a quality resident health care focus to a quality health care system focus.



ACCESS AND FLOW

Our Management team has received education in LEAN “Six Sigma” management to reduce waste in time, space, resources and Kaizen “Good Change” business approach for continuous quality improvement and change management. Kaizen encourages the management team to be on the floor “Gemba”, for direct observation to help identify improvement opportunities. Four important incentives (the first 2 are Ministry supported) to increase Gemba and reduce waste that were initiated:

1. Integrated Medication Management, to provide a single-entry medication system to reduce error and time spent entering & checking orders. It allows instant access to check orders, reordering medications, managing order receiving and verifications.

2. AMPLIFI: which coordinates our resident discharge processes from hospitals digitally. This health information exchange is inputted directly into the home's electronic health system, Point Click Care, in a read only format that provides the health care team with the information to continue timely care and treatment.

3. Our Maintenance department now categorizes all repairs/replacements to identify ongoing building, resident or staff safety issues as well as education needs.

4. Infection Prevention and Control (IPAC) Consultant resource to assess the effectiveness of our IPAC system. This consultation has led to a redesign of our environmental practices to upgrade processes with infection prevention and safety standards.

5. Nuiz App: we have implemented the Niuz app which has improved communication within all levels of our organization in real time.

6. We have been accepted as an early adopter for the RAI-MDS 2.0 to interRAI LTCF and going live April 1st, 2025.

7. Surge Learning: all our Policy & Procedure Manuals have been uploaded for staff easy access.



EQUITY AND INDIGENOUS HEALTH

1. Collection of data from residents is captured in our "Getting to Know Me Assessment". Questions asked are related to the resident's cultural and spiritual background, languages spoken, preferred language, gender identification and preferred use of pronouns.
2. For employees, we use a Cultural Diversity Staff Language Survey. We also inquire about their availability to assist with interpretation and/or translation for residents.
3. Annual Employee Satisfaction Survey and Annual Resident Satisfaction Survey with questions specifically related to diversity and inclusion.
4. Ethics, Diversity and Inclusion Committee meet quarterly.
Implemented Strategies:
-Planning, implementing and promoting various events related to

diversity and inclusion based on the demographics of the residents and staff.

- The committee utilized the CLRI "Embracing Diversity Toolkit for LTCH
- Diversity and Inclusion Calendar of Events is utilized by various departments
- We launched an initiative to use gender inclusive language in all our policies.
- Education to all staff: Diversity and Inclusion; Gender Inclusiveness; World Religions and the Impact on LTC
- Residents participated in a 3-part focus group series on Diversity and Inclusiveness
- Land Acknowledgment posted at both entry ways and at the beginning of several meetings
- Created a "Private Reflection" space for all staff to used for prayer, quiet time, meditation or reflection.
- Annual participation in National Day for Truth and Reconciliation

PATIENT/CLIENT/RESIDENT EXPERIENCE

Maple Villa fosters a person and family-centred care that is respectful, compassionate, culturally competent care which is responsive to the needs, values, beliefs, and preferences of our residents and family members.

The focus is always on creating and nurturing mutually beneficial partnerships among Maple Villa's team members and the residents and families we serve. Our organization engages with residents and families through Resident and Family Council Meetings, resident and family members participate in all of the home's committee meetings and on an individual basis at multidisciplinary team care conferences, and through informed consent. The goal is to provide individualized person centred care based on evidenced best practices.



PROVIDER EXPERIENCE

Like every Health Care organization, Maple Villa struggles with staff shortages across every discipline within the home. This has led to staff burnout, inefficient workforce and decreased morale. We have developed an organized orientation process for all our new hires & Agency staff which includes a general orientation day to provide information about our Mission, Vision Values; mandatory IPAC, HR, safety education; and a tour of the facility.

Team promotion, self care Wellness, 'every resident is your resident' are the 3 key values that are being developed in the home.

1. Every department has been encouraged to formalize their staff meeting agenda to include: P&P updates, resident care & safety issues, IPAC, Occupational Health & safety, Ministry and other Regulatory updates, Accreditation and CQI updates
2. In home staff, resident and family feed back have resulted in incentives in the home such as a quiet room for staff for spiritual practices, a hairdressing care plan to provide support for those residents who require it during those times, a strong spiritual support team to provide spiritual support on a weekly and as needed basis for private support as well as group/congregational support. Work life balance information regularly posted for all staff. Niuz app to replace our paper newsletters, memos, meeting minutes, policies, job postings, emails. Niuz provides timely access to the issues affecting the home and it allows to home to promote and support a work life balance focus.
3. We have an active Resident's Council that is key to providing feedback for the home about activities provided by the home, meals selection for the seasons, how they can support their care providers (staff). They are actively involved in staff incentives such as pizza days, coffee and donuts for staff morale. Many of the

Council members also sit on interdisciplinary committee meetings to provide active input and provide a direct liaison between residents, staff, and other health service providers.

4. Our Employee Assistance Program has been extended to our part-time employees as well to support them as well with challenges to work and work life balance. Part time employees face the barrier of not being vested in the benefits programs available to full time staff.

SAFETY

Safety is a core value of Maple Villa that has shaped our resident safety and incident management. Safety has been embedded into our policies, assessments, audits and education. We have reviewed our incident management systems and ensured that safety reporting is supported by the leadership and promotes a just culture. This includes taking the proactive approach to reduce risk of imminent recurrence and other potential threats. Mitigating risks are discussed and reviewed during the resident admission process, end of life huddles, weekly RAI-MDS meetings, monthly Responsive Behaviour-PIECES meetings, Pain Rounds, monthly staff meetings, general orientation of new hires, auditing processes of all departments.

We promote transparency in incident reporting, which includes post incident 'hot' analysis with Huddles involving frontline providers, resident and family as they can advocate for and support change implementation.

All incidents are reviewed quarterly by the Resident Care Committee and are reportable to Continuous Quality Improvement and Professional Advisory Committees. Recommended actions are implemented with assessment and reassessment to monitor effectiveness. Immediate changes are communicated in a timely

manner and are reflected into the home's processes or resident plan of care. Long term changes are integrated within the home or resident plan of care to promote sustained improvement and quality of care.

Maple Villa encourages respectful and open communication around the results of incident analyses at all levels of the organization. Combining findings with those from different service providers helps identify themes/patterns and provides opportunities to improve our culture of safety.



PALLIATIVE CARE

Maple Villa has implemented a well-structured Palliative End-of-Life (EOL) Care Program which we reference as the Gentle Care Program.

Our Gentle Care Program focuses on a holistic approach for our

residents to improve their quality life throughout their health trajectory, through to EOL planning and bereavement.

An eAssessment – Early Identification of Palliative Care - was developed and is completed on admission, quarterly and with a significant change of health status. This is a comprehensive assessment of the resident's current status, preferences and goals and identifies palliative care needs.

The resident's plan of care is individualized to meet their current needs, preferences, EOL wishes and goals of care.

The Level Care Directives are also reviewed and discussed with the resident or SDM/POA for care to make informed and effective decisions.

We ensure that our residents receive respectful, compassionate care that focuses on their dignity, comfort, and their values during the final stages of life.

Our Gentle Care Program strives to assist the resident and their caregivers to address physical, psychological, social, spiritual, and practical issues, and their associated expectations, needs, hopes, and fears; to prepare for and manage EOL choices and the dying process; to cope with loss and grief, and to promote opportunities for meaningful and valuable experiences, and for personal and spiritual growth.

What do we have to offer? Our Gentle Care Program is inclusive of:

- Medical Assistance In Dying (MAID) Policy and Procedure

- Staff training and education on the principles of palliative care, pain management and cultural competency
- Pain Consultant meets with us monthly and when necessary to discuss a resident who would benefit with
 - improved pain management interventions
- A Gentle Care Committee who meet quarterly
- A designated private room: The Tranquility Care Room
- Purple Heart Dove Signage: indicating EOL Care which all staff recognize
- Gentle Care Huddle: a communication/information tool to share with staff every shift
- Informative Literature that we have developed with our Medical Director, Pain Consultant, Hospice and our
 - multidisciplinary team: Palliative Care Pamphlet and What to Expect When Someone You Love is Dying Booklet
- Palliative Order Set: pain and symptom management
- The Dying Person's Bill of Rights
- Family Caregiver Support
- Spiritual Support
- Code Dove/Honor Guard & Dignity Blanket: Quality of Life rituals to honor our residents' death with dignity
 - and respect as they leave their Home
- Celebration of Life is held quarterly with full attendance of family and caregivers to honor, to remember and
 - to celebrate the lives of our residents who have passed



POPULATION HEALTH MANAGEMENT

Understanding the challenges that the pandemic has brought to LTC homes, we identified that we had to strengthen our foundation, tools and processes to ensure that our team continued to have the resources needed to ensure our residents received the best care and services possible. We support and encourage virtual appointments with consultations. We have more laptops available for staff/residents for this purpose.

- Our home partners with Behavior Support Ontario and Halton Geriatric Mental Health Outreach who provide monthly rounds for support on challenging behaviors.
- Halton Pain and Palliative Care Network provide monthly pain rounds where a resident's pain challenges are assessed and discussed.
- Monthly Education opportunities with Wound Therapeutic Consult through Convatec for our nursing staff.



CONTACT INFORMATION/DESIGNATED LEAD

Administrator: Kerri-Ann Gelinis
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Director of Care: Jocelyn Page
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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 21, 2025**

Nada Nisivic, Board Chair / Licensee or delegate

Kerri-Ann Gelin, Administrator /Executive Director

Jocelyn Page, Quality Committee Chair or delegate

Other leadership as appropriate
