



2024-2025 Quality Improvement Initiative Report

Quality Improvement Lead: Shaikh Ahmed Quality Lead and Saad Ahkter CEO

Priority Areas for Quality Improvement

Albright Manor is a home that supports our strong commitment to providing quality care and services that help seniors in our community make the very most of their lives. Through our quality improvement program we wish to continuously improve the care and services provided to the residents we serve. The following areas have been identified as priority for fiscal year 2024/2025. Decreasing avoidable hospital transfer, improving the positive responses of residents feeling that staff listen and residents can express their opinions without fear, and collecting baseline data for a percentage of staff who have completed equity, diversity, inclusion and anti-racism education.

How we identify Priority Areas and How Quality Improvement is measured

Albright implements both proactive and reactive risk management methodologies, recognizing them as integral components of our Quality Improvement Program. Residents and Families are actively encouraged to participate in Quality Team meetings to aid in identifying and mitigating risks within the Home.

Furthermore, we have created a comprehensive resident and family satisfaction survey inclusive of inquiries concerning staff performance and the care encounter. The insights obtained from these surveys serve as the foundation for identifying improvement opportunities from which we can devise targeted interventions addressing the concerns voiced by our residents and their families.

To gather feedback, we are looking to establish regular resident and family council meetings to gain insight into their care experiences. With this feedback, we can craft resident quality of life programs characterized by personalized care plans, a diverse range of recreational activities, and ready access to spiritual and emotional support services.

Survey:

The Resident Satisfaction Survey was conducted during the month of October 2023 with the residents or mailed to family members of residents who were unable to provide feedback on their own. These surveys were completed by December 29, 2024. The survey results and related action plan were shared with the Residents Council on February 20, 2024. These results were also posted in the main entrance for easy viewing access for all residents, family, visitors and team members.

Survey Actions:

The survey resulted in several actions that prioritize resident's feeling that staff listen to them and residents feeling that they can express their opinions without fear or consequence. These actions include: staff training on active listening, empathy, and communication; establishing feedback mechanisms, and creating a feedback oriented culture; improving communication channels, adding townhall meetings and an online portal, providing conversation tools; and empowerment of regular resident council meeting, empower residents in decision making, and protocol of feedback follow up responses. These action items were reviewed with Residents council February 20th, 2024, Family Council January 30, 2024, and with staff March 31, 2024.