

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

April 3, 2025



OVERVIEW

In 2024, Albright Manor continued to build on the foundation of stability, improvement, and growth established in 2023, with a clear focus on quality improvement initiatives. We made significant strides in several key areas to enhance the care we provide. Firstly, we completed a major lighting upgrade, converting all lights to energy-efficient LED, resulting in cost savings and improved environmental sustainability. In addition, we adopted a Scratch Cooking system with DN Hospitality, addressing long-standing issues with food waste (40-50% of raw food) and budget overspending. By investing \$250K into new equipment and staff training, we are now able to provide higher quality meals while staying within budget.

Another significant achievement was successfully completing our 3-year CARF accreditation, focusing on Dementia Care and Facilities Management. This milestone demonstrates our commitment to maintaining high standards of care. Furthermore, we introduced NP-led care conferences, which have been instrumental in reducing Emergency Department visits by engaging residents and families in more proactive care planning. These improvements have positioned Albright Manor for continued success, ensuring we remain at the forefront of quality care in 2024.

ACCESS AND FLOW

In 2024, Albright Manor continued to enhance access and flow for residents through strategic initiatives aimed at improving care and minimizing hospitalizations. We successfully hired a full-time Nurse Practitioner (NP) to provide increased access to care, reducing unnecessary emergency department visits and hospitalizations. With the NP available on-site throughout the week, residents have

consistent, high-quality care, and our Most Responsible Physician (MRP) continues to be scheduled weekly for additional support.

Interdisciplinary collaboration remained a top priority in 2024. By fostering strong partnerships between primary care providers, specialists, long-term care facilities, and hospitals, we have further streamlined care transitions. The use of tools like BOOMR and Amplify has facilitated seamless coordination of care, ensuring residents receive continuous support across all stages of their healthcare journey. This approach has minimized disruptions, confusion, and delays in medication, ensuring smoother transitions for residents.

Additionally, we focused on strengthening our resident-centered care approach by involving both residents and their families in care planning and decision-making. This year, we enhanced communication with families through care conferences, providing them with detailed updates about their loved ones' well-being. We also implemented a resident satisfaction survey to gather valuable feedback on our care practices, allowing us to continuously improve and adapt to the needs of our residents and their families.

In addition to the improvements in care, we made significant upgrades to our facility to further enhance the resident experience. We completed the installation of LED lighting throughout the building, improving energy efficiency and creating a more comfortable and brighter environment for residents. We also implemented a Scratch Cooking system with DN Hospitality, which has significantly reduced food waste and allowed us to provide higher-quality meals while staying within budget. These initiatives have not only improved access to care but also reinforced our

commitment to providing a comfortable, efficient, and high-quality living environment for all residents.

EQUITY AND INDIGENOUS HEALTH

In 2024, Albright Manor continued its commitment to equity and Indigenous health through ongoing quality improvement initiatives and cultural safety efforts. Building on our previous work, we have placed a strong emphasis on promoting equity and enhancing the well-being of Indigenous residents.

Our priority this year was expanding staff training and education on Indigenous cultural safety and humility. We implemented more comprehensive seminars, online courses, and in-person training sessions to ensure that all staff members are equipped with the knowledge and skills to provide culturally competent care. These efforts are designed to foster respectful relationships with Indigenous residents and their families, ensuring they feel valued and understood.

In addition to staff education, we have continued to assess and improve our policies, procedures, and practices to identify and address any areas that may contribute to healthcare disparities. By consistently monitoring our performance, we ensure that our approach remains adaptive to the evolving needs of Indigenous residents.

Albright Manor is dedicated to advancing equity and Indigenous health by integrating cultural safety principles into every aspect of our organizational culture. Through continued staff training, evaluation, and potential collaborative partnerships, we strive to create an inclusive and supportive environment where all residents

receive high-quality, culturally competent care. Our efforts in 2024 reflect our ongoing commitment to eliminating disparities and fostering an environment of care that respects and celebrates the cultural diversity of our residents.

PATIENT/CLIENT/RESIDENT EXPERIENCE

In 2024, Albright Manor continued to prioritize resident and caregiver engagement in the development of initiatives tied to our Quality Improvement Plan (QIP). We expanded our efforts to collect and integrate experiential feedback through various methods, including surveys, care conferences, and ongoing communication with both residents and their families.

One key initiative that continued in 2024 was our effort to reduce the use of antipsychotic medications, co-designed with diverse representation from residents and their caregivers. We recognize the potential negative effects of antipsychotic usage, such as increased fall risks, decreased mobility, and cognitive decline. Our multidisciplinary team, which includes medical and nursing staff, along with members from our resident and family councils, remains dedicated to addressing these concerns through informed and collaborative efforts.

Additionally, we continued our routine resident and family satisfaction surveys, with a specific focus on medication usage, side effects, and the overall impact on resident well-being. The feedback gathered has been instrumental in refining our antipsychotic reduction program, which includes staff education, ongoing medication monitoring, and the implementation of non-pharmacological interventions for managing behavioral symptoms.

To further enhance resident experience, we also strengthened our approach to gathering feedback by establishing regular resident and family council meetings. These meetings provide valuable insight into residents' care experiences, enabling us to develop quality of life programs that are personalized and diverse. In 2024, these programs include tailored care plans, a wider variety of recreational activities, and increased access to spiritual and emotional support services, ensuring that we continue to meet the holistic needs of our residents and their families.

PROVIDER EXPERIENCE

In 2024, Albright Manor continued to prioritize the well-being of our healthcare providers, recognizing the ongoing challenges they face, including burnout and staffing shortages. We remain committed to supporting our team, understanding that their well-being is closely tied to the quality of care we provide to our residents.

To address these challenges, we expanded our initiatives focused on staff wellness and reducing burnout. We continued to offer regular check-ins with management, access to counseling services, and structured training programs. Additionally, we implemented new measures, such as introducing flexible scheduling to reduce longer hours, upgrading staff break areas for better comfort, and providing enhanced technology like updated laptops to streamline their work processes. Our commitment to staff acknowledgment remained strong, with appreciation events, recognition programs for those who go above and beyond, and opportunities for staff input on improvements to their work environment.

In 2024, we also continued to involve our healthcare workers in the

quality improvement process. We facilitated regular staff meetings to discuss care practices, identify areas for improvement, and foster staff-driven initiatives to enhance care delivery. These conversations, coupled with ongoing education and training, helped us refine our approach to resident care and staff engagement.

Furthermore, we built upon the feedback collected through our resident and family satisfaction surveys, which included questions about staff performance and the care experience. The insights gained have allowed us to identify specific areas for improvement and develop targeted interventions that address both the needs of residents and the concerns raised by staff, ensuring we create an environment of continuous improvement and high-quality care.

SAFETY

In 2024, Albright Manor continued to enhance its proactive and reactive risk management strategies as an integral part of our Quality Improvement Program. We remain committed to fostering an environment where both residents and their families are actively engaged in identifying and mitigating risks, with their participation in Quality Team meetings playing a key role in this process.

Our ongoing efforts are focused on preventing resident injuries, minimizing financial loss, and safeguarding nursing home assets. We maintain comprehensive loss control programs designed to detect, assess, and rectify potential risks before they become significant issues. Regular reports from the Ministry of Health and Long-Term Care Inspections are utilized to evaluate risks and measure the effectiveness of our action plans, ensuring that we remain responsive to any challenges that may arise.

The Health and Safety Committee continued its commitment to identifying annual initiatives that prioritize the betterment and safety of our residents. These efforts are bolstered by the annual review of our Risk Management Plan, which receives endorsement from the President of the Resident Council and the Administrator. This review process ensures that the Risk Management Plan, along with the Strategic Plan, Quality Improvement Plan, and Accessibility Plan, are seamlessly integrated to provide a comprehensive approach to risk management for all stakeholders.

Additionally, our approach to population health remained central to our efforts in 2024, focusing on the broader health and safety of the entire resident population. The Administrator and team members consistently worked to proactively identify and address risks, ensuring that both potential and actual risks are minimized to ensure the continued safety and well-being of all residents. These combined strategies demonstrate our commitment to maintaining a safe, responsive, and high-quality care environment.

POPULATION HEALTH MANAGEMENT

In 2024, Albright Manor remained steadfast in its commitment to treating each resident as an individual and ensuring they feel truly at home. We continued to prioritize respect, safety, and comfort, ensuring that residents' physical, mental, and emotional needs are met through tailored programs and services. Our approach centers around providing a supportive environment that empowers residents to maintain their health and happiness, while also giving them the freedom to engage in activities they enjoy.

We further strengthened our focus on resident-centered care by actively involving residents and their families in care decisions and honoring their preferences and abilities. This collaborative approach, supported by interdisciplinary teams, allowed us to create personalized care plans that were both responsive and reflective of each resident's unique needs. We also recognized the importance of continuous learning for our staff, ensuring they were equipped with the skills and knowledge needed to provide the highest standard of care.

Listening to residents' feedback remained a cornerstone of our approach. We gathered insights through surveys, care conferences, and other forms of communication, and used this information to refine and enhance the care we provide. In 2024, we continued to celebrate the successes of our residents and their families, fostering a positive and inclusive atmosphere. By committing to ongoing staff education and integrating feedback into our practices, Albright Manor upheld its values and worked toward delivering the best possible care, in line with our organizational mission and vision.

CONTACT INFORMATION/DESIGNATED LEAD

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CEO Albright Centre

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QI Lead, IT & Foundation Coordinator

OTHER

How We Identify Priority Areas and Measure Quality Improvement
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 help identify and mitigate risks within the Home.

Additionally, we have developed a comprehensive resident and family satisfaction survey that includes questions about staff performance and the overall care experience. The insights gathered from these surveys serve as the foundation for identifying improvement opportunities, enabling us to devise targeted interventions that address the concerns of our residents and their families.

To further enhance feedback collection, we are working to establish regular Resident and Family Council meetings to gain deeper insight into their care experiences. This feedback will guide the development of quality-of-life programs that emphasize personalized care plans, diverse recreational activities, and access to spiritual and emotional support services.

The Resident Satisfaction Survey was conducted in October 2024,

with surveys either completed directly by residents or mailed to family members of those unable to provide feedback on their own. The surveys were finalized by November 2024, and the results, along with the corresponding action plan, were shared with the Residents' Council on February 20, 2025.

These results were also publicly posted in the main common area and will be published in 2025, following a similar timeline as the 2024 survey process.

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

Board Chair / Licensee or delegate

Administrator /Executive Director

Quality Committee Chair or delegate

Other leadership as appropriate
