



Designated leads

Lisa McVety, Director of Operations/Administrator

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The Lakeridge Gardens Quality Committee consists of Core Members listed in the embedded document.



LG Quality Committee Core Mem

Quality Improvement Priorities 2023/2024

Lakeridge Gardens is proud to celebrate their second anniversary as Ontario's first long-term care home to open 320 beds for occupancy through the Accelerated Build Pilot Program. As also the first long-term care site owned and operated under Lakeridge Health, we continue to propel the vision of *One System. Best Health.* and foster an environment that aligns with the mission of *We empower people to live their best health.*

Determination of Priorities

The determination of priorities is rooted in the Principles of Partnership to Person-Centred Care to improve the quality of care, services, and programs at Lakeridge Gardens. This is achieved through results obtained in the annual Resident Experience survey, Residents' Council and Family Council, and ongoing feedback that is provided to our teams, key quality indicator performance, and internal audits.

As part of an integrated system with Lakeridge Health, Lakeridge Gardens is sensitive to the diverse needs of the community. To achieve this, Lakeridge Health annual business planning and strategic directions, and review of performance data from Canadian Institute for Health Information (CIHI) from Lakeridge Gardens and the wider Central East Region are also integrated in the determination of priorities.

Furthermore, alignment is achieved with consideration of regulatory and legislative requirements and provincial system priorities that are expressed in annual Quality Improvement Plans.



Lakeridge Health Workplan 2023 2024

Monitoring, Evaluation, and Adjustment

Lakeridge Gardens has adopted an approach of Whole System Quality (IHI, 2021), which aligns with the direction of the Lakeridge Health. Quality management is achieved through a focus on quality planning, quality control, and



quality improvement to achieve Whole System Quality (IHI, 2021). Lakeridge Gardens engages in the following activities to enable monitoring, evaluation, and adjustment of quality initiatives:

Quality Planning

- Annual program planning and goals
- Annual quality improvement planning
- Annual program evaluations
- Annual resident experience surveys
- Annual family experience surveys (TBD)



2023-24 Program Planning_Healthy A



24-25 Lakeridge Gardens Program Pla

Quality Control

- Monthly meetings of committees for required programs including review of key performance indicators and relevant internal audits
- Monthly Professional Advisory Committee
- Monthly Nursing Professional Practice
- Monthly Lakeridge Gardens Quality Committee inclusive of report out from required programs of key performance indicators and relevant internal audits and priority indicators outlined in annual Quality Improvement Plan and Program Planning Goals
- Weekly Quality Improvement Huddles
- Internal Audits and Quality Checks
- Regulatory inspections including Ministry of Long-Term Care, Ministry of Labour, and Public Health

Quality Improvement

- Tiered huddles including tier 1 Huddles at shift report
- Weekly Quality Improvement Huddles
- Resident, family, and essential partners-in-care feedback

Approach to Continuous Quality Improvement

Continuous Quality Improvement is systematic and ongoing approach to identifying opportunities for improvement, developing strategies and implementing change, measuring the impact of those changes, and learning about the next steps. Lakeridge Gardens, in collaboration with Lakeridge Health, adopt lean methodologies to support continuous quality improvement. This involves the use of a variety of tools including, but not limited to:

- Project A3 or charter



- SIPOC
- Pareto chart
- Fishbone Diagram
- Process and value stream mapping
- Plan-Do-Study-Act
- Standard work

Communication

A multi-modal and multi-lingual approach to communication is taken dependent on the stakeholder group(s), including but not limited to:

Internal

- Direct email
- Monthly staff newsletters
- Weekly Quality Improvement Huddles
- Tiered huddles including daily Tier 1 Huddles at shift change
- Posting on Resident Home Area Quality Improvement boards and Tier 1 Huddles boards
- Use of leadership team to communicate directly with team members

External

- Direct email using ActivityPro portal
- Monthly resident, family, and essential partners-in-care newsletters
- Posting on home-wide Quality Improvement board
- Presentations at Resident's Council and Family Council

2023/2024 Lakeridge Gardens Proud Moments

Launch of Resident Experience Survey

- 30% response rate achieved.
- Baseline collection of Experience indicator for 2024/2025 Quality Improvement Plan, whereby overall satisfaction to the question “do residents have a voice in participating in care planning decisions and services received” was 75.3% .
- Highest rated drivers included:
 - Respondents reported being treated with respect.
 - Personal room preferences met such as temperature, lighting, and cleanliness.



V1 RESULTS POSTER
LG Resident Experienc



- Respondents reported recreation provided calendars that are accessible and easy to understand, and respondents reported high overall satisfaction with special function nights.
- Bottom rated drivers included:
 - Overall satisfaction with laundry
 - Visibility and time spent by medical, PSWs, RPNs, and RNs
 - Variety of flavourful and nutritious foods

Behavioural Support Transition Unit Pilot Project

- In October 2022, the Ontario government announced Lakeridge Gardens would receive funding to open a 16-bed Behavioural Supports Transition Unit (BSTU) to be situated within the existing Resident Home Area of 2 West
- The BSTU is equipped to offer individuals enhanced levels of care that is patient-centred and founded in evidence-based practice. Features of the BSTU includes private room accommodations, enhanced call systems, access to a secure outdoor area, and increased staffing with embedded behavioural team supports.
- In September 2023, occupancy began for the BSTU. Since then 14 individuals have been admitted to the BSTU, of which 9 have achieved their clinical goals and two have transitioned to community destinations

Potentially Inappropriate Antipsychotic Medication

- The percentage of residents not living with psychosis who were given an antipsychotic medication what a quality indicator selected for the 2023/2024 QIP. There was limited movement on the quality indicator to move towards the Provincial Benchmark of 19%
- 2022/2023 Canadian Institute for Health Information report was released stating Lakeridge Gardens performance on this quality indicator was 40%
- A task group was assembled to address the opportunities with prescribers, CIHI submissions, and documentation accuracy.
- The four-quarter average for 2023/2024 is now 19%, with Q4 2023/2024 currently at 13.29%.

2024/2025 Lakeridge Gardens Quality Improvement Initiatives

Lakeridge Gardens Quality Improvement Initiatives align with annual submissions of Quality Improvement Plans coupled with additional quality initiatives identified after program evaluations of all clinical and non-clinical areas.

2024/2025 Quality Improvement Plan



Lakeridge
Health

Lakeridge
Gardens

Continuous Quality Improvement Initiative Report

March 2024

The Quality Improvement Plan (QIP) program cycle for 2024/2025 saw a shift from priority indicators to four priority issues to enable flexibility and options, both of benefit for a long-term care home associated within an acute care organization.



Lakeridge Health QIP
Workplan - 2024-25.p

Details of the QIP submission is linked for further information.

2024/2025 Additional Quality Improvement Initiatives

Lakeridge Gardens has identified the following quality improvement initiatives:

- Daily Management System
- Essential Partners-In-Care Program
- Implementation of inaugural Family Experience Survey
- Introduction of the Bridge Program
- IPAC specialist training and certification