



**HELLENIC CARE FOR SENIORS
CONTINUOUS QUALITY IMPROVEMENT REPORT FOR 2024/2025**

April 2024

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Designated Lead

Sherly Celis, Manager of Quality Improvement & Education

Quality Priorities for 2024-25

Hellenic Care for Seniors is pleased to share its 2024-25 Quality Improvement Report. Our commitment to quality is reflected in our mission: “Hellenic Home is a not-for-profit charitable organization, dedicated to providing personalized quality care and a wide range of services to all seniors with a focus on the Hellenic Canadian population” and our vision: “To be at the forefront of seniors’ changing needs”.

The outlined Quality Improvement Plan approach prioritizes the improvement of resident safety while also fostering diversity, equity, indigenous health, and cultural safety through quality initiatives and staff education. The Home's Annual Quality Improvement Plan (QIP) is driven by a continuous commitment to enhance organizational performance and enhance the quality of life for our residents.

Resident’s Safety

Hellenic Care for Seniors (Toronto) Inc. specifically aims to underscore the importance of prioritizing the indicator related to antipsychotic use without a diagnosis of psychosis. This priority has been reaffirmed as the set goal in the 2023/24 QIP was not achieved. In response, the Home will enhance the review process for antipsychotic medication use in residents without a psychosis diagnosis. This will involve conducting a quarterly audit review before Continuing Care Reporting System (CCRS) submission to ensure data accuracy, proper diagnosis, and appropriate drug indication. The objective is to identify residents who may benefit from a trial dose reduction, and potential discontinuation of antipsychotic medication.

Health Equity

To align with our commitment to diversity and inclusivity, Hellenic Care for Seniors is developing an Equity, Inclusion, Diversity, and Anti-Racism Work Plan (EIDAR). The home will engage in the following steps to develop this plan:

Reviewing existing policies to identify and rectify any biases or gaps in equity.

- Providing sensitization training on cultural sensitivity, anti-racism, and diversity for all employees.
- Implementing continuous educational programs to keep employees informed and engaged.
- Organizing cultural celebrations and awareness events to highlight different cultures and promote understanding among staff and residents.
- Introducing various cultural foods through tasting programs or cooking demonstrations to encourage appreciation of different culinary traditions.

Additionally, our Quality Improvement Plans for this year focus on providing awareness training, identifying areas of improvement, and fostering cultural competency among our staff and volunteers. To facilitate these initiatives, the home will utilize the online learning platform Surge Learning. These efforts aim to foster a culture of inclusivity, respect, and appreciation for diversity within the organization while ensuring the best care possible for our residents.

Patient/Client/Resident Experience

Hellenic Care for Seniors firmly believes in establishing a partnership with residents as active participants in their healthcare decisions. We achieve this by actively engaging residents and their families in all aspects of their care. We foster open communication with residents and their families and encourage them to participate in various events such as annual resident/family satisfaction surveys. These surveys serve as valuable tools to assess the effectiveness of our quality improvement initiatives, ensuring that the care we provide aligns with the preferences and needs of our residents.

The Home complies with the Fixing Long-Term Care Act, 2021, through annual participation in the Alliance Resident and Family Satisfaction Survey. The Resident's Council guides and collaborates on the survey, with results and actions shared in the Ministry's Quality Improvement Initiative report. In November 2023, the Home engaged in the Alliance Group Experience Survey, presenting results to the Resident Council in March 2024, and plans on communicating results and action plans to families through the Home's Newsletter in April 2024. Remarkably, the response rates for both resident and family experience surveys were commendable, with all twenty-six eligible residents participating, achieving a perfect one hundred percent response rate, and thirty-seven out of sixty-six distributed family surveys completed, yielding a respectable fifty-six percent response rate, surpassing the favorable threshold of thirty percent for surveys of this nature.

Outcomes of the 2023 Resident/Family Experience Satisfaction Survey

Hellenic Care for Seniors would like to spotlight positive outcomes from the resident and family surveys, including:

- Resident Survey - Staff treat me with respect – 96% Always/Usually.
- Family Survey - Staff treat my family member with respect – 100% Always/Usually.
- Resident Survey – Staff respect my privacy – 100% Always/Usually
- Resident Survey – Staff are available to me within a reasonable time when I need them – 100% Always/Usually
- Resident Survey – I receive daily care that meets my needs – 100% Always/Usually
- Resident Survey – Staff support me to access other health professionals if needed (i.e. dentist etc.) – 100% Usually/Always
- Family Survey - Staff respect my family member's privacy – 100% Always/Usually.
- Family Survey - My family member's daily care needs are met – 100% Always/Usually.
- Resident Survey - The Home is clean and tidy – 100% Always/Usually.
- Family Survey - The Home is clean and tidy – 100% Always/Usually.
- Resident Survey – The building and grounds are well maintained – 100% Always/Usually
- Family Survey – The home is free from odours – 100% Always/Usually
- Family Survey – I am aware of who to contact to initiate a concern/complaint – 97% Always/Usually
- Family Survey – I receive updates about my family member's health – 96% Always/Usually
- Resident Survey – There are activities that support my religious/spiritual beliefs – 96% Always/Usually
- Resident Survey – There is a good variety of food and drinks offered to me – 96% Always/Usually
- Resident Survey - Staff listen to me – 100% Always/Usually

Areas for Improvement:

Resident Survey: Communication

Resident responses to the following questions in the "Communication" domain of the Resident Experience/Satisfaction Survey saw significant decline in the "Usually/Always" response:

- I am aware of who to contact to initiate a concern/complaint.

62% Usually/Always. (Decrease of 31% from 2022 – 93%) - Note: 31% answered “Did not know” in 2023 compared to 7% in 2022.

- I receive updates about my health.

46% Usually/Always. (Decrease of 54% from 2022 – 100%) - Note: 38% answered “Did not know” in 2023 compared to 0% in 2022.

- The physician explains things to me in a way that I can understand.

42% Usually/Always. (Decrease of 43% from 2022 – 85%) - Note: 35% answered “Did not know” in 2023 compared to 0% in 2022.

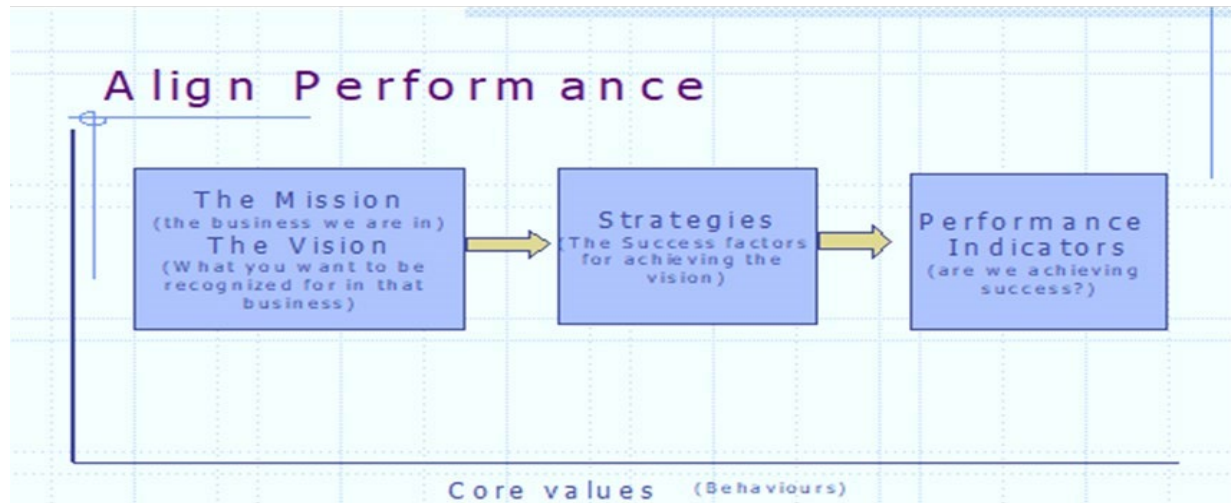
Actions Plans:

- During Resident Council meetings, residents will be informed about the Concern & Complaint process, including who to contact to initiate a complaint.
- The Concerns & Complaints Management process will be posted throughout the Home on the Home’s display screens accessible to all stakeholders.
- The Home will continue to have all residents present during Interdisciplinary Care Conferences unless the resident chooses not to attend.
- The Home will continue to update residents on changes related to their health and care.
- Physicians will continue to complete rounds with a Greek Speaking Staff member to ensure that residents can understand the physician during assessment and examination.

The satisfaction rates expressed by our residents and their families through the surveys are notably high, indicating an overall positive sentiment. Across various domains including dignity and respect, care provision, recreation, food and dining, home environment and services, communication, and COVID-19 related responses, most areas received favorable ratings. Importantly, none of the areas reached or exceeded the 15% threshold for responses indicating dissatisfaction ("never/sometimes"), highlighting widespread contentment among respondents. To maintain or even surpass these satisfaction levels, the home is dedicated to actively seeking input from the Resident’s Council and involving families in Multidisciplinary Care Conferences. Additionally, the Home’s Management will persist in implementing and upholding current interventions aimed at monitoring and assessing operations, thereby ensuring that resident and family satisfaction remains a central focus.

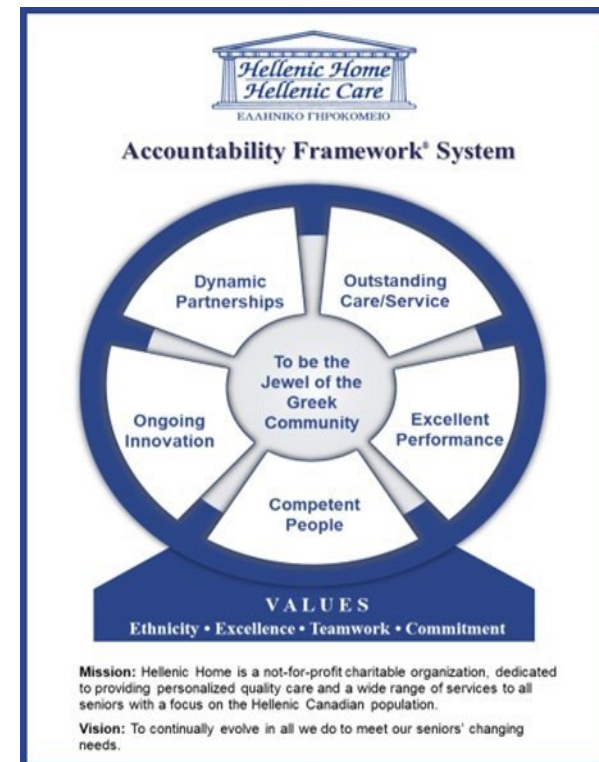
Hellenic Home’s Approach to CQI

Hellenic’s quality structure begins with the development of the Strategic Plan. The plan is driven by the Board and provides direction to the organization for the upcoming years. The development of the Quality Management Program aligns with the Strategic Plan and is intended to form a framework to connect performance to strategy. By aligning the mission, vision, and core values of the organization with specific goals, the philosophy and directions are set to guide everyone across the organization.



Our Accountability Framework is the foundation for planning processes and sets our five (5) success factors for strategic planning:

1. Outstanding Care and Service. This principle fosters a culture that focuses on seniors' quality of life, safety, and risk management.
2. Excellent Performance promotes accountability and provision of quality care.
3. Competent People creates a culture that focuses on learning and collaboration.
4. Ongoing Innovation develops systems to encourage and recognize innovation.
5. Dynamic Partnerships expands and enhances community links and partnerships.



Quality Improvement initiatives are identified under the 5 success factors to ensure alignment with the strategic plan. The quality planning cycle begins in February of each year when the interdisciplinary team reviews and evaluates achievement of goals and objectives from the previous year using various internal and external sources:

1. The Strategic Plan

2. The Risk Management Plan
3. Results of surveys (resident, family, and employee surveys)
4. Complaint Monitoring
5. Fixing Long Term Care Act 2021 and Regulations 246/22
5. Canadian Institute for Health Information (CIHI) Reports
6. Quality Ontario's Publicly Reported Indicators and Benchmarks
7. Long Term Care Home Service Accountability Agreement (L-SAA)
8. Excellent Care of All Act and Quality Improvement Plan (QIP) from the previous year.
10. Comparative data from the Alliance Group
11. Technological advancements
12. Other such as Toronto Public Health, Office of the Fire Marshal, the Ministry of Labour, Occupational Health, and Safety Act, etc.

Based on this data, Hellenic Care for Seniors (Toronto) begins to develop its priority areas for the upcoming year through Family and Resident consultations, board discussions and collaborations with external partners. The subsequent quality improvement plan (QIP) is submitted to Quality Ontario annually in April.

Process to Monitor and Measure Progress, Identify Adjustments and Communicate Outcomes

The Senior Leadership Team ensures that the quality of resident care and services is monitored and evaluated on an ongoing basis. Hellenic Care for Seniors monitors and measures progress towards achievement of the quality improvement initiatives through the Quality Improvement Committee. Hellenic uses the Tom Nolan's Quality Framework improvement model for quality improvement (What are we trying to accomplish, how will we know if a change is an improvement, what change can we make that will result in an improvement (Plan, Do, Study, Act)). Various tools are used to collect data to inform the quality model including audits, root cause analysis, program evaluations, key indicator tracking and ensure a consistent system to monitor and measure progress. Monthly the Quality Improvement lead tracks key indicators which are then presented to the Interdisciplinary Long Term Care Committee for review and input. Key indicator trends are presented to the quarterly meeting of the Quality Improvement Committee. If the changes have not resulted in an improvement over time, the committee members will adjust the quality improvement initiative and start the Plan, Do, Study, Act cycle again. Quarterly the home's performance on key system indicators is shared with the board of directors.

Communication is key throughout the Quality Cycle. Postings on T.V. monitors, handouts, and one on one communication with residents are some of the methods used. Hellenic Care utilizes technology to increase communication. These will remain in place on an ongoing basis.

1. Cliniconex, an automated care messaging system is utilized by the Home. This tool allows the Home to send updates (i.e. memos, notifications, policy change notices etc.) to family members and is to share quality initiatives.
2. Survey monkey and paper survey are used to obtain feedback from families and volunteers have also used it to elicit feedback from residents on quality-of-care issues.
3. Hellenic Care for Seniors has number of handouts, fact sheets and memos provided to visitors, family members and residents to keep them updated on statistics, protocols, and current performance. These are available in hard and soft copy.
4. Resident Council representatives have input to the resident and family survey including recommending improvements based on the report.

5. The home in collaborates and shares information with key stakeholders such as Resident Council, Public Health Units, AdvantAge Ontario, Ontario Long-Term Care Association (OLTCA), the Ministry of Long-Term Care, the Alliance Group (a group of non-profit homes that focuses on sharing information, measuring performance, and collaborating on joint initiatives) etc.
6. Hellenic Care for Seniors utilizes Policy Medical to provide staff with easy access to policies and protocols and those that may have been updated due to ministry directive updates, quality initiatives or best practice guidelines.
7. The Quality Improvement Committee membership includes key stakeholders to ensure broader circulation of quality initiatives and outcomes.
8. The home posts its QIP on the organization's website to publish its plan and demonstrate its objectives, and process for each quality initiative.

Residents Council has received a copy of this document.