Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

April 5, 2024



OVERVIEW

About Yee Hong Centre

Yee Hong is one of the largest not-for-profit senior care organizations in the country, delivering high-quality, culturally appropriate services to Chinese and other Asian seniors since 1994. Operating 805 long-term care home beds, a wide range of community support and housing services, and a hospice residence, Yee Hong annually serves more than 15,000 individuals across the Greater Toronto Area – in Mississauga, Scarborough, and York Region. Yee Hong also builds seniors organization and system capacity through its advisory services, Private Career College, and research.

With a vision of seniors living their lives to the fullest, with independence, health and dignity, Yee Hong provides a full continuum of culturally appropriate services and care for seniors living in any setting to optimize their physical, mental, social, and spiritual well-being. We also build organization and system capacity for high quality, inclusive, and integrated services, and care.

Yee Hong Centre – Scarborough Finch (Yee Hong Finch) operates 250 long-term care beds with also a specialization in caring for residents requiring peritoneal dialysis needs. With approval from the Government of Ontario to operate additional long-term care beds, Yee Hong is in the early construction phase of building a new 224-bed long-term care centre adjacent to this location. This new centre will help address Yee Hong's current multi-year waitlist and increase access to culturally appropriate services to support the community's increasing needs. 3 NARRATIVE QIP 2024/25

Yee Hong Finch is one of the few designated ethnocultural longterm care homes in Ontario and determined to meet the linguistic needs, food preferences and culturally specific activities of this vulnerable population. In addition to serving Chinese speaking seniors, we have 25 beds dedicated to residents of Japanese descent and delivering culturally appropriate care will enhance both their quality of care and quality of life overall.

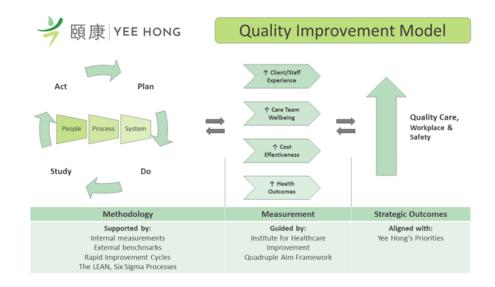
Quality Improvement Model at Yee Hong

Yee Hong is committed to continuous quality improvement. Each year, we engage in quality improvement initiatives and client safety planning activities to meet or exceed the needs of our residents, clients, families, and staff. The development, monitoring and planning of quality improvement and management activities are guided by Yee Hong's Quality Improvement (QI) Model.

The QI Model depicts quality improvement as an integrated and continuous process that will be adjusted according to outcomes meaningful to Yee Hong's strategic directions and goals. The QI Model is based on four principles: evidence-based, client-centered, provider-informed, and corporately aligned.

Supported by analytical processes and using annual surveys results, Yee Hong has determined a strong association between (a) employee engagement and employee satisfaction; and (b) resident/family experience. Furthermore, Yee Hong has identified key factors that may predict the level of job satisfaction for various groups of employees. Guided by these findings, Yee Hong incorporates the well-established and proven Institute for Healthcare Improvement QI processes and the Quadruple Aim Framework to ensure that Yee Hong's quality improvement, client safety and employee engagement initiatives will positively realize health outcomes, client experience, cost effectiveness and care team well-being.

The following diagram provides a visual depiction of Yee Hong's QI Model and its components:



ACCESS AND FLOW

Yee Hong Finch has undertaken a series of strategic initiatives aimed at improving patient access and ensuring timely and comprehensive healthcare delivery. One key initiative involves increasing accessibility by providing Nurse Practitioner services, complementing the 24/7 access to medical doctors. This expanded availability facilitates a broader range of primary care services, allowing for timely assessments and interventions. In addition, we

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have utilized specialized hospital services such as Seamless Care Optimizing Patient Experience (SCOPE) program by Scarborough Health Network which has allowed some of our resident's cases to bypass the emergency department and directly access diagnostic services that enhanced patients' experience and reduced delays in receiving necessary tests and assessments.

Furthermore, Yee Hong Finch has prioritized patient-centered care through collaborations with external support organizations like Behavioral Support Ontario (BSO). This partnership addresses the complex needs of behavioral management cases, ensuring a multidisciplinary approach to patient care. Additionally, the establishment of an in-house palliative care consultation with the help of our Yee Hong Hospice team further enhances the organization's commitment to providing access to specialized and compassionate care to individuals with life-limiting illnesses.

Yee Hong Finch's efforts have resulted in notable success in minimizing avoidable emergency department (ED) transfers, as evidenced by the impressive avoidable ED transfer rate of 11.3 per 100 resident days, according to the latest CIHI report for October 2022 to September 2023. This rate compares favorably to the regional average of 24 per 100 days in the Home and Community Care Support Services (HCCSS) Central East region. These collective initiatives underscore Yee Hong's dedication to a patient-centric approach, systematically reducing barriers to accessing timely and appropriate care and reflecting a comprehensive strategy to enhance the overall patient experience and health outcomes.

EQUITY AND INDIGENOUS HEALTH

Fundamentally, Yee Hong as an organization exists to address the

lack of culturally appropriate services in the long-term care, community and hospice/palliative care sectors that lead to differential access to quality services for Asian and other ethnic minority seniors in the Greater Toronto Area. Since its inception, Yee Hong has been driven by its mission to offer a full continuum of culturally appropriate services and care for seniors living in any setting to optimize their physical, mental, social, and spiritual wellbeing. Yee Hong also builds organization and system capacity for high-quality, inclusive, and integrated services and care.

Health equity is created when individuals have a fair opportunity to reach their fullest health potential. Achieving health equity requires identifying and reducing unfair and unjust barriers to health services access. To advance health equity within our organization and the communities we serve, Yee Hong has established a corporate Equity, Diversity, and Inclusion (EDI) Team to offer guidance and resources for integrating health equity in policies, and to explore opportunities to increase staff's EDI awareness and sensitivity. We believe that improving EDI awareness will further promote a more inclusive working environment and lead to better access to care for our residents, clients, and family members.

Yee Hong's EDI Team is dedicated to ensuring that all residents, clients, and family members receive culturally appropriate care. We strive to foster an inclusive and equitable environment where everyone is treated with respect and dignity. We are committed to promoting diversity and cultural awareness within our organization and throughout our services, and we work hard to ensure that everyone is provided with the same opportunities regardless of race, gender, sexual orientation, age, ability, or any other factor. We aim to create a space where all individuals feel safe, respected

and that they belong.

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Adapted from: Registered Nurses' Association Best Practice Guideline on Embracing Cultural Diversity in Health Care: Developing Cultural Competence

PATIENT/CLIENT/RESIDENT EXPERIENCE

Yee Hong Finch has achieved notable progress in enhancing the holistic experience for patients, clients, and residents, emphasizing open communication, resident involvement, and family satisfaction. The organization has maintained a continued open-door policy to receive feedback from residents, clients, and their families, fostering transparency and a culture of continuous improvement.

In 2023, Yee Hong initiated a comprehensive Quality Improvement Plan, prioritizing resident involvement in their care plans. This person-centered approach empowers residents to actively participate in decisions regarding their health and well-being, promoting autonomy and a sense of empowerment. This commitment to resident engagement is reflected in the significant improvement in resident satisfaction rates, specifically about planning of care involvement which rose from 65% to 82%, highlighting personalized and satisfactory experiences tailored to individual preferences and needs.

Furthermore, Yee Hong Finch has made remarkable strides in family satisfaction, with a notable increase from 95% in 2022 to a remarkable 99% in 2023 on how Yee Hong involves them in the care of their loved ones. This achievement underscores the organization's dedication to involving families in the care process, ensuring their concerns and preferences are addressed. Measures to enhance patient-centred care, including ongoing staff education, increased family meeting time, and proactive communication during changes in medical conditions, highlight Yee Hong's commitment to providing culturally appropriate and patient-centred care.

The 2023 resident satisfaction surveys were conducted from October 30 to November 3, 2023, and the survey results yielded an overall average satisfaction score of 93%.

The family satisfaction surveys were conducted between September 28 and November 17, 2023, and the rate of overall satisfaction with the quality of care and services provided to their family members at Yee Hong was 99%.

The 2023 resident and family satisfaction survey results were shared with the residents' council on February 27, 2024, and the family council on January 9, 2024. The copies of the results were communicated through emails and posters from January to February 2024 as well to residents, families and staff. The 2023 6

Quality Improvement work plan and narrative was shared with the family and residents' council on April 11 and April 12, 2023, respectively.

Yee Hong held regular virtual town halls with family members to updates and information about Yee Hong's Strategic plan and current events. Overall, Yee Hong's holistic approach and dedication to continuous improvement are evident in the positive outcomes and increased satisfaction rates among residents and their families.

PROVIDER EXPERIENCE

Yee Hong recognizes the pivotal connection between provider experience and the quality of resident care. In response to the heightened workload faced by staff during the pandemic, Yee Hong has proactively implemented a range of strategies aimed at fostering staff wellness and engagement. Various staff wellness activities and events have been organized throughout the year, including a staff BBQ party, raffles, staff appreciation meals, and a well-attended staff celebration event in November 2023. This celebration, attended by approximately 500 Yee Hong staff members, highlighted Yee Hong's success through laughter, shared meals, presentations, and awards.

Furthermore, Yee Hong has sustained its commitment to the Employee and Family Assistance Program (EFAP), providing additional support to staff during these challenging times. The organization has conducted two staff town halls, both virtually and in-person, facilitating open communication channels. According to the latest Staff Pulse Survey in 2023, 83% of respondents expressed that Yee Hong actively supports their wellness through engaging activities, efforts to reduce overtime, and a commitment to promoting diversity, equality, and inclusion. These initiatives collectively reflect Yee Hong's dedication to prioritizing and enhancing its valuable staff's overall experience and well-being.

SAFETY

Yee Hong prioritizes and promotes safety through ongoing learning and continuous improvement initiatives. A dedicated Quality and Practice Team systematically analyzes corporate risk trends and incidents. Our internal clinical team also conducts weekly risk management meetings to address significant issues related to NARRATIVE QIP 2024/25

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resident safety within the home. Monthly monitoring of key performance indicators, such as falls, skin and wound incidents, and the appropriate use of antipsychotic medications, is a cornerstone of Yee Hong's safety efforts. Notably, Yee Hong's clinical data demonstrates consistently low fall incidents, restraint usage, and avoidable ED transfers compared to the provincial Ontario average.

In 2023, Yee Hong implemented a collaborative patient care approach with a community partner to mitigate skin and wound incidents. This collaboration, integrated into the Quality Improvement Plan (QIP), resulted in a substantial reduction of skin and wound injuries from 1.9% in Q2 of 2022 to just 1.2% in Q2 of 2023. The organization remains vigilant by continuously monitoring all key performance indicators, ensuring that action plans are implemented as needed.

Crucially, Yee Hong actively shares significant data with staff, residents, and their family members, fostering a culture of transparency and informed decision-making. Through these comprehensive safety initiatives, Yee Hong not only prioritizes the well-being of its residents but also demonstrates a commitment to ongoing learning, improvement, and the delivery of high-quality care.

At Yee Hong, our resident's safety is of utmost priority. We are dedicated to providing a safe and secure environment for our residents and take this responsibility seriously. We are committed to following all safety protocols to ensure resident safety and wellbeing, including training our staff, conducting regular audits, and implementing comprehensive resident safety policies and procedures, such as our falls prevention program, medication safety, and Infection Prevention and Control program. We have an incident reporting system in place to help us continually monitor, evaluate, and improve our services and to minimize the risk to our residents.

Risk Management

With the incident reporting system- Risk Management, all resident safety incidents can be reported promptly to the family or substitute decision-makers, the appropriate level of staff and the Ministry, as required by applicable legislations and laws. Risk management system ensures that follow-up actions are taken in a timely matter and allows data collection and analysis so that we can develop strategies to prevent the recurrence of events. On a scheduled basis, we review all incidents, analyze results and other safety-related data with our interprofessional care team and quarterly DQC meeting. During these meetings, our care team discusses fall incidents, usage of antipsychotic medications and restraints, skin, and wound, and challenging behaviours.

Furthermore, at every resident and family council meeting, our team shares key performance indicators related to resident safety and provide education on care programs. During staff meetings, care team leaders also inform staff of any medication and critical incidents that had occurred and how to manage and prevent recurrences.

Infection Prevention and Control

The Infection Prevention and Control (IPAC) program is a comprehensive and collaborative effort to prevent and control the

spread of infection in our centres. It involves the implementation of policies and procedures, providing ongoing education, completing audit processes, and collaborating with key stakeholders. We have collaborated with Scarborough Health Network IPAC Hub to share best practices and develop innovative approaches to IPAC practices. By taking an evidence-based and proactive approach to infection prevention and control, we ensure the health and safety of our staff, residents, and family members.

Medication Safety

We are collaborating with our pharmacy vendor and are committed to providing the highest standard of medication safety for our residents. We have taken the following necessary steps to ensure medication safety:

- Implementing safe medication policies and procedures
- Conducting regular medication safety audits and evaluations
- Providing comprehensive medication training and education
- Reviewing and analyzing each medication incident
- Installing cameras and surveillance in all medication rooms
- Documenting medications on the electronic medication administration record (eMAR) system

Workplace Violence

Preventing workplace violence is a top priority at Yee Hong, despite its infrequent occurrence. Our primary focus is to ensure the safety of every resident and staff member, treating reports of violence with utmost seriousness. • Establishing comprehensive policies and procedures, including staff training, risk monitoring, and annual Code White training and drills to proactively address and de-escalate potential incidents.

- Reporting immediately to the division's Executive Director and the corporate Joint Health & Safety Committee in the event of workplace violence, they promptly conduct investigations and report findings.
- Adhering policies and procedures, such as the Zero Tolerance of Abuse Policy, Code White Policy, and Electronic Incident Reporting System.
- Providing regular training in prevention and de-escalation techniques, including Code White training, Gentle Persuasive Approach (GPA) training, etc.
- Leveraging an interdisciplinary team collaboration approach to address these incidents effectively, including nursing staff, Activation staff, Social Worker, Spiritual and Religious Care Practitioner, Pharmacist, and external partners.

Emergency Preparedness

We recognize the critical importance of emergency preparedness. Anticipating a wide spectrum of unplanned events both internal and external. We developed a comprehensive policy to ensure that we respond timely and effectively. Our commitment extends to our residents, clients, employees, and other stakeholders. Our approach encompasses these key principles:

- We maintain appropriate emergency response plans that provide clear guidance for responding to potential emergencies.
- Our emergency preparedness aligns with the local health system and sector-specific plans. Staff participate in external planning

forums, including regional pandemic preparedness committees. • Regular drills and practices are evaluated for readiness based on various emergencies (e.g., loss of services, fires, medical crises, natural disasters, infectious diseases). We maintain annual testing

POPULATION HEALTH APPROACH

to ensure preparedness and continual improvement.

Yee Hong Finch has demonstrated a proactive and collaborative approach in working with healthcare partners and Ontario Health Teams to meet the diverse needs of the population. The organization actively engages in initiatives that prioritize preventive care, health promotion, and well-being for the entire community. Participation in roundtable discussions with other Long-term care homes and Scarborough Health Network (SHN) highlights Yee Hong Finch's commitment to infection control readiness and disease prevention. By collaborating with peers and the broader healthcare community, the organization contributes to a collective effort to enhance preparedness and situational awareness, ensuring a robust response to health challenges.

As a vital member of Behavioral Support Ontario (BSO), Yee Hong Finch plays a crucial role in addressing the complex needs of individuals requiring behavioural support. Additionally, the Executive Director of our home serves as a co-lead in creating a recommendation package for other Long-term care homes (LTCH) concerning goals of care discussions and palliative care in partnership with the Scarborough Health Network project team. This leadership role exemplifies Yee Hong Finch's dedication to sharing best practices and shaping guidelines that improve the quality of care in the broader LTCH community.

CONTACT INFORMATION/DESIGNATED LEAD

Lloyd del Rosario, Executive Director T: 416.412.4571 ext. 5100 | M: 416.455.2033 | E: lloyd.delrosario@yeehong.com | F: 416.321.0034 Yee Hong Centre – Finch | 60 Scottfield Drive | Scarborough, ON, M1S 5T7

OTHER

Julie Kwan, Director, Quality, Performance and Practice T: 416.412.4571 ext. 1113 | M: 647.881.0728 | E: julie.kwan@yeehong.com | F: 416.321.0034 Yee Hong Centre – Finch | 60 Scottfield Drive | Scarborough, ON, M1S 5T7

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