Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 7, 2025



OVERVIEW

Sandfield Place is a family-run home, that has seen 3 generations. We are unique in a way because we our administrator is a registered nurse herself and strives to give the residents the care they deserve. Sandfield Place prides itself for a high standard of care. We are very quick to act if there are any issues with our residents. We want our residents to feel at home here and we want our family members to be worry-free when their loved one is at the facility. Our management staff have an "open-door" policy where we want staff, residents and families to speak with us about any concerns or challenges they experience. Our goal is to establish trust and a therapeutic relationship with our residents and family members.

Sandfield Place always strives to do the best we can for our residents. We are continuously taking on new challenges, taking on new educational opportunities for us to understand what is new and what is best practice. We want to ensure our residents get the best care possible. We look for ways to support the family members and residents through the process. We want our residents and families opinions when we create or update our policies to ensure we are making our policies geared towards our resident preferences. Overall, the resident's care and comfort has always been our priority at Sandfield Place.

ACCESS AND FLOW

One of the Quality Improvement goals includes keeping the residents in their home, and treating them in their home, instead of sending the residents to the emergency room. We are working in this in a few ways. We have collaborated with the NLOT program, which is an initiative through the Ministry of Health and Long-term care. The NLOT provides a nurse practitioner to come into the different long-term care facilities and assess the residents who were sent to the hospital, and think of strategies to keep them in the home if a similar occurrence should happen. Sandfield Place has also hired a full-time Nurse Practitioner to come to the facility. She works in addition with our medical director to assess the residents, deal with clinical concerns and treat the residents in house rather than sending them to the hospital.

We were also the recipient to receive the Local Priorities Funding, which is a type of funding issued by the Ministry of Health and Long-Term Care to assist long-term care facilities purchase equipment, training, etc to support the home to keep residents in the home, accept a wide variety of clients and prevent emergency room visits. With this funding, we were able to purchase bariatric equipment, a ECG machine, bladder scanner, a CAD pump, Intravenous pump, a vein visualization device, opportunities for training, and much more. With this funding we are able to keep our residents in their home, where they are comfortable and treat them here. Whereas sending to hospital, may be an emotional or confusing experience and should only be done if we exhausted all our options at the home.

EQUITY AND INDIGENOUS HEALTH

Sandfield Place respects all residents of different cultures.

Sandfield Place has a "Getting to know you" document, where when someone is new to the Home, we want to get to know them better. We include in this document what the resident's cultural, spiritual and religious preferences are, and what their practices may be. We want to include these practices into the resident's care plan. For those residents who are indigenous, we speak with the resident and their families about what type of things we can put in place for their care. If there is anything special they would need. We are fortunate to have some staff members as well who are indigenous and can share their own practices in the home. We welcome different cultures and different practices. We also support the indigenous residents by ensuring our staff are educated and have training on indigenous cultures. We ensure to do this annually and upon orientation.

Should there be anyone who comes to the facility who has a disability, we ensure a plan for this individual and make sure they are able to get around, and have easy access to what they need. We are very open here at Sandfield Place, and ensure we accommodate these disabilities. We ensure we follow the AODA guidelines to ensure those with disabilities are treated equally.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Sandfield Place strives to keep the resident experience positive. We look for suggestions from our residents and family members through family council and residents council to improve our services ensuring we are looking out for our residents and families. We send out a resident satisfaction survey annually at Sandfield Place. Last year, we were able to get some feedback about different times we can be doing activities, such as the evenings or weekend times, which we have been looking into further. We are ensuring on weekends to provide our "Bingo" games and the "social hour" where we are able to get some treats and some residents together. We also have provided a "movie" night in the evening times, which the residents seem to enjoy.

For our resident satisfaction survey, it was also brought up more explanation for our admission process. We have taken this into consideration and have assigned a specific manager to do the admission process. This will help take the time the residents and families need for admission and provide any explanations they need or answer any questions. This also allows us to complete different assessments that are required by the Fixing Long Term Care Act, 2021.

From the Resident Satisfaction Survey, it was brought up about having some aggressive residents at the facility. At this time, we are working hard to educate everyone, including residents, families and staff about what dementia is and what responsive behaviours may look like. Our residents safety is our priority at Sandfield Place and we will ensure that the residents will not be put at risk.

PROVIDER EXPERIENCE

Staffing always seems to be an issue in healthcare, and potentially other fields as well. Sandfield Place prides itself for not using any agency staff, even during the COVID-19 pandemic. Currently, Sandfield Place is ensuring that the nursing to resident ratio is equivalent to the 4 hours of care required by the Ministry of Health. We have been able to put another evening PSW on to assist with call bells and the snack pass during the evening time. Sandfield Place is also in partnership with the local schools and colleges such as St Lawrence College (Cornwall Campus) and The Catholic District School Board of Eastern Ontario (CDSBEO). From these schools, and this partnerships, we are able to give PSWs, RPNs, RNs, SSWs and paramedics a clinical placement within the long-term care sector. For retention, we are able to provide these different professions with an educational clinical experience and we were able to hire and retain quite a few students who have come through our doors for their placements.

We also have applied for funding in accordance with the PREP LTC Program through CLRI. This funding provides staff who train and take on students for their placements an Honoria for the preceptor. This gives our staff a bit of an incentive to be a preceptor and show their students a good clinical experience.

SAFETY

Sandfield Place takes the resident's safety as its top priority. Through Sandfield Place's safety program, one of our top priority is trying to ensure there is enough fall prevention interventions in place. Residents who fall, are at risk for injuries, such as a hip fracture, and can cause the resident to decline from this fall. We implement different interventions in the resident's care plan, such as moving the resident as close to the nursing station desk as possible, to apply different alarms such as a chair or bed alarm, or magnetic alarm, or hourly checks. Everyone has a different care plan dependent on what their risk factors may be. Their care plans will be individualized based on their risks. Some residents have raised perimeter mattresses or floor mats, whereas others have hip protectors and non-slip socks on their feet. We also ensure to get other members of our team involved to see if there is other things that can be done for the resident's safety. We have included referrals to physiotherapy, the dietician, our wound care nurse, Occupational Therapy, etc. We have also created a pamphlet to educate families and residents on falls and what we can be doing to prevent this.

IPAC has been a priority for us, especially since with the recent pandemic. We are educating staff and residents on different vaccines, the importance of hand hygiene, and Donning and Doffing of PPE. We are keeping up to date on regular vaccinations for our residents, and educating residents and families about why these vaccinations are needed. Influenza, COVID-19, RSV, and other viral or bacterial infections could be quite harmful to the vulnerable population. We want to ensure our residents are safe and do not contract these infections.

PALLIATIVE CARE

Palliative care is an essential part of our nursing care. Typically, we try to educate the resident and family member to provide a palliative approach to care when they are admitted to the facility. We are being educated on the fact that a palliative approach to care is different than end of life care. A palliative approach to care ensures that we are keeping the resident as comfortable as possible, also keeping the residents quality of life satisfactory. End of life care is caring for the resident in their end of life stages- which means keeping the resident comfortable, repositioning, oral care, skin care, etc.

Sandfield Place has recently done a project on palliative care in collaboration with CLRI. In doing so, we have done a self-assessment to see where our strengths and weaknesses are. We have implemented a few interventions into our practice, including "lunch and learn" education sessions. Which is a few educational sessions we had on Palliative care and different topics, such as debriefing, serious illness conversations, etc. Sandfield Place also has other educational opportunities, such as the LEAP course for registered staff, and the PACE course for all nursing staff, which educates our staff on what is best practice for palliative care. We even had some of our resource team, and nursing team attend a seminar in Ottawa with the Perley Health which was a Palliative Care Skills Day. It was a great opportunity to learn about standards for palliative care.

Sandfield Place is working on implementing a few interventions into our practice for palliative care. Firstly, to ensure we are having frequent conversations with the resident and their families about the prognosis, and any changes or decline in the resident's condition. We also have created a pamphlet on end-of-life care, and what that looks like at Sandfield Place. We want to ease the resident and family's minds to reassure them we do thorough and

proper end of life care at the facility.

POPULATION HEALTH MANAGEMENT

Sandfield Place looks at their residents in a holistic way. We understand the resident's needs for their physical health, but also their emotional well-being, their spiritual well-being, social well-being, etc.

Sandfield Place works in collaboration with a social worker, who comes to the facility twice a week to help our residents with their emotional well-being. Our social worker has also helped family members who may be having a struggle as well. Our Behavioural Support of Ontario (BSO) is here 7 days a week to help our residents who may struggle with inactivity, or those who experience responsive behaviours provide the 1:1 interventions or provide a small group activity. We also work in collaboration with the Royal Ottawa, whom has resources such as a psychiatrist, RN liaison, and behavioural therapist who we can refer to for residents who experience responsive behaviours or residents who may have a mental health diagnosis.

Sandfield Place also works in collaboration with a physiotherapist, who attends to the residents weekly and assesses those who may be falling, or someone in pain, or someone who has reduced weight bearing. The physiotherapist has successfully registered with ADP which allows him to perform wheelchair assessments for our residents, so we do not need to look externally for these assessments. We also have a physiotherapist assistant who is here 5 days a week and does special exercises according to what the physiotherapist has designated to these residents. Our restorative team is here 7 days a week, in which they assist the residents who are able to function with the activities of daily living (ie, feeding, walking, etc).

We have a wonderful nurse practitioner on board who is at the home three days a week, and a physician who is here one day a week. Our DOC is also at the home five days a week, and has her RN Prescribing certificate. Between these prescribers, the residents are well looked after.

We are fortunate to be in partnership with a mobile dentist whom comes from Ottawa and will do x-rays and other dental concerns for our residents in house. This prevents our residents from having to go out to a dental office to get their teeth looked at.

Mobile X-ray and Lifelabs also comes into the facility to assess the residents for non-emergent requests. Such as routine bloodwork or if the resident is experiencing new pain.

Sandfield Place is very fortunate to have a variety of partnerships within the community to ensure our residents are well looked after.

CONTACT INFORMATION/DESIGNATED LEAD

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OTHER

Sandfield Place is very fortunate to have a great team to look after our residents. We prioritize our resident's quality of care and health care needs. We look at our residents as a whole, and individualize their care plans according to their needs and preferences. We strive to keep the residents well cared for.

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