

Continuous Quality Improvement – Interim Report

DESIGNATED LEAD

Brenda Wepler

Administrator

QUALITY PRIORITIES FOR 2022/23

Hanover Care Centre is pleased to share its 2022/23 Quality Improvement Plan (QIP). Our ongoing commitment to quality is reflected in our mission “To Live by the Golden Rule”. The plan identifies “looking at alternative options to improve efficiency and service” and “to involve all staff in our goals” and a “high quality of life for all residents” as a key strategic value.

The primary purpose of the Hanover Care Centre is recognizing that institutionalization is not the norm, and therefore we strive for the well-being of each individual through the recognition and fulfillment of physical, emotional, and spiritual needs. To this end we are committed to provide, in as much as is possible, a “home like” environment

Hanover Care Centre’s QIP is aligned with Health Quality Ontario’s standards for long-term care. High-level priorities for this year’s QIP are determined by Hanover Care Centre’s management in collaboration with all LTC staff, families, and residents.

RESIDENT RELATIONS

The pandemic gave our home challenges where we had to engage with residents in new ways including the use of virtual technology and small groups. HCC has Resident and Family Councils. Councils meet regularly where quality improvement information is provided and received. The Councils are involved in providing feedback and input into the decision making process related to care and services within the facility.

Resident/Family Satisfaction Surveys are conducted annually, and provide information that guides the development of quality improvements plans for the facility. Survey results are reviewed, along with complaints and concerns received and help in

development of Quality Improvement Plans for our facility.
Feedback and input received through our partnerships with other facilities and vendors
Guide us on what changes are needed to our programs and service delivery to enhance
experiences.

QUALITY Priorities for 2022/23

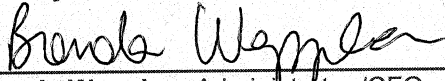
1. Safe and Effective Care: Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.
Current: 24.24% Target: 21%

2. Service Excellence: Percentage of residents responding positively to "What number would you use to rate how well the staff listen to you?" *Target: 85%*

3. Service Excellence: Percentage of residents responding positively to "I can express my opinion without fear of consequences" *Target: 85%*

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 **July 14/2022**



Brenda Wepler, Administrator /CFO