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Intercare Corporate Group Inc. - "The Heart of Excellence"



What is Quality Improvement?

Quality improvement (QI) in continuing care homes is a continuous, systematic framework used to evaluate and enhance resident care and facility operations. It involves analyzing data, identifying areas for growth and testing small, manageable changes to ensure care and service delivery is safe, effective and resident-centered. All Intercare departments and staff are responsible for QI and required to lead, participate and contribute to QI!

Key Pillars of QI in Continuing Care Homes (Types A, B & C)

Safe: Preventing harm / injuries, falls and medication errors.

Effective: Ensuring care follows best practices and produces positive health outcomes.

Timely: Reducing delays in treatments, assessments and responses.

Efficient: Avoiding the needless waste of resources, time and medical supplies.

Equitable: Providing the same high standard of care regardless of a resident's background or socio-economic status.

Client-Centered: Respecting the dignity, personal preferences and individual needs of the resident.

'Quantitative' Data versus 'Qualitative' Data

Quantitative Data - Measures the "What" and "How Much"

- **Core Focus:** Numbers, statistics and objective facts.
- **Primary Questions:** How many? How much? How often?
- **Common Methods:** Surveys with closed-ended questions, polls, experiments and data.
- **Analysis:** Use of statistical and mathematical tools to find patterns and establish cause-and-effect.
- **Example:** 78% of residents rated breakfast at the care home as "Excellent" on a 1-5 scale.

Qualitative Data - Explores the "Why" and "How"

- **Core Focus:** Words, meanings, feelings and subjective experiences.
- **Primary Questions:** Why did / does this happen? How did / does this happen?
- **Common Methods:** Open-ended interviews, focus groups, observations and open-text survey responses.
- **Analysis:** Categorizes information into common themes, narratives and insights.
- **Example:** Review / use resident responses to reveal / better understand why residents find breakfast dissatisfying, despite overall good response ratings by the residents.

QI Projects at Intercare Continuing Care Homes (CCH)

Brentwood Care Centre - Type A CCH (formerly 'Long Term Care')

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Director of Care	Decrease Use of Chemical Restraints	Decrease the overall percentage of residents on anti-psychotic medication by 5% over the next six (6) months and by 15% over the next twelve (12) months within the Care Home.
Recreation	Personalized Song Creation using AI	Evaluate whether the use of the 'Suno App' improves mood and engagement among cognitively intact residents and residents living with dementia in a Type A Continuing Care Home setting.
Rehabilitation	Management and Provision of Slings	- Ensure compliance with IP&C practices (i.e. Designated slings for each resident; no sling crossover use between residents). - Ensure proper handling and laundering of the slings to prolong their lifespan. - Establish an improved system that better tracks the inventory and whereabouts of slings within the Care Home.
Case Manager (St. Andrew's West)	Chemical Restraint Reduction	Reduce the number of chemical restraints and antipsychotic use on the unit by 10% in the next five (5) months.
Case Manager (St. Andrew's East & Central)	Wound Charting	Increase weekly wound charting by nurses on the units by 10%.
Case Manager (Hillhurst Unit)	Antipsychotic/chemical restraint reduction	Decrease the use of antipsychotic medications/chemical restraints on the unit by 10% over the next six (6) months.
Case Manager (Sunnyside)	Antipsychotic/chemical restraint reduction	Reduce the number of residents on chemical and antipsychotic medication on the unit by 10% in the next three (3) months.
Case Manager (Morrison)	Antipsychotic/chemical restraint reduction	Reduce the use of antipsychotic medications on the unit.

Brentwood Care Centre - Behavioral Support Unit (BSU)

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Clinical Team Leader (CTL)	Improved Communication among BSU Staff	- Promote better continuity of care. - Decrease resident behaviors. - Decrease the use of physical restraints.
Recreation	Enhancing Socialization through Music	- Increase Social Interaction: Foster meaningful connections among participants on the BSU unit through group music activities (e.g. karaoke, I-Pad music & group music session). - Improve Mental Health: Utilize the therapeutic benefits of music to enhance mood and reduce symptoms of resident anxiety, depression & aggression. - Boost Self Esteem: Encourage self-expression and creativity to build confidence and self-worth in BSU residents.
Case Manager	Nurse Documentation	Reduce incidents of missed documentation and documentation errors by staff on the BSU unit (Unit's project reduction goal: 50%).
Rehabilitation	Independence, Strength and Mental Health	- Engage BSU residents in enjoyable and meaningful activities to increase their sense of purpose and quality of life. - Improve overall physical and/or mental health of BSU residents. - Improve strength and balance to reduce likelihood of BSU resident falls.
Social Worker	Improving Depression Rating Scores (DRS) among BSU Residents	- Reduce Depression Rating Scales (DRS) by using activities that can help BSU residents manage persistent anger issues and periods of sadness. (e.g. 'One-to-one' sessions with the unit's Social Worker; BSU resident engagement in an activity of their choice such as discussing their past life or other area(s) of interest to them). - Improve Mental Health by facilitating group activities on the BSU unit (groups to include a maximum of three (3) BSU residents at a time) using crafts, memory exercises, playing board games to help with social engagement and reduce resident anxiety and depression.

QI Projects at Intercare Continuing Care Homes (CCH)

Chinook Care Centre - Type A CCH (formerly 'Long Term Care')

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Director of Care	Reduction in inappropriate use of Chemical Restraints	✚ Decrease the percentage of residents on chemical restraint by 5% over a period of one (1) year within the Care Home.
Recreation	Progress Notes	✚ Implement a process whereby Recreation Therapy Aides (RTAs) complete progress notes on specific residents with individualized goals that clearly reflect the resident's engagement, responses and progress related to targeted recreation therapy interventions.
Rehabilitation	Enhance Fall Prevention through the "6 P's of Fall Prevention" framework	✚ Improve fall prevention outcomes by ensuring all post-fall reviews and care plans include a clearly identified root cause categorized using the "6 P's of Fall Prevention" (<i>Pain, Positioning, Personal Needs, Possession, Pathway and Plan</i>) and targeted, individualized fall-focused interventions are implemented to reduce repeat falls and enhance resident safety.
Dietician	Safe and Dignified Eating Checklist and Education	✚ Improve the safety, consistency and dignity of eating assistance provided to residents by Health Care Aides (HCAs), Therapy Assistants (TAs) and Recreation Therapy Aides (RTAs) by implementing a standardized checklist and brief education sessions, resulting in more reliable adherence to best practices and enhanced mealtime experiences for residents.
Case Manager (Chinook Park)	Chemical Restraint Usage	✚ Decrease the number of PRN chemical restraints used on the unit for behavior and ensure 'initiation and change record' is completed by every shift.
Case Manager (Richards Way)	Wound Documentation	✚ Ensure all wound documentation meets policy requirements.
Case Manager (Park Place)	Responsive Behaviours	✚ Reduce the incidence of resident 'responsive behaviors' (e.g. agitation, aggression, yelling) on the unit by 5% in the first two (2) months; 10% by the end of 3rd and 4th months; and 15% by the end of 5th month.
Case Manager (Fosters Way)	Fall Reduction	✚ Reduce fall related fractures on the unit through enhanced care planning and the use of the "6 P's of Fall Prevention" (<i>Pain, Positioning, Personal Needs, Possession, Pathway and Plan</i>), including staff input on post fall discussions.

Chinook Care Centre - Complex Dementia Care Unit (CDC)

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Clinical Team Leader (CTL)	Improving Content and Quality of Nursing Documentation on the CDC Unit	✚ Improve content and quality of nursing documentation on the CDC unit through a reduction in the use of 'labeling language' in nursing progress notes (CDC Unit's project reduction goal: 75%).
Recreation	Dementia Montessori Kits	✚ Decrease evening behaviours when CDC residents are not in recreation programming.
Rehabilitation	Music & Movement Group	✚ Reduce falls for CDC residents at high risk of fall-related injury through participation in the "music & movement" group that is aimed at improving resident strength, balance, coordination and reducing agitation. ✚ Enhance cognitive stimulation and quality of life for CDC residents (a secondary potential benefit of the 'music & movement' group).
Case Manager	Urinary Tract Infections	✚ Reduce the number of CDC residents on the unit with Urinary Tract Infections (UTI) to a reduction goal of zero.

Chinook Hospice – Type C CCH (Hospice)

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Clinical Team Leader (CTL)	Improving Staff support to increase Staff retention and satisfaction	✚ Achieve the best support for Hospice staff in order to increase Hospice staff retention.
Case Manager (Hospice)	Delirium	✚ Manage delirium in Hospice patients within the Hospice care environment.

QI Projects at Intercare Continuing Care Homes (CCH)

Southwood Care Centre - Type A CCH (formerly 'Long Term Care')

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Director of Care	Reduction in inappropriate use of Chemical restraints at SCC (LTC)	✚ Reduce the use of chemical restraints by 15% over a period of one (1) year in the Care Home.
Recreation	Afternoon Music Intervention to Reduce 'Sun Downing' Behaviors in Long-Term Care Residents with Dementia	✚ Determine if playing music between 3:00 pm and 4:00 pm can reduce the frequency of 'responsive behaviors' (specifically: wandering, exit seeking and yelling) associated with 'sun downing' in residents living with dementia in the Care Home.
Rehabilitation	Decline in late loss of Activities of Daily Living (ADL)	✚ Minimize decline in Activities of Daily Living (ADL) - e.g. bathing, eating, dressing, toileting and mobility - in residents at the Care Home and significantly improve residents' quality of life by promoting their independence and well-being.
Case Manager (Bonavista)	Shower Refusal Documentation	✚ Monitor/audit resident shower refusals on the unit on a monthly basis, to ensure refusal and reason for refusal are documented in progress notes.
Case Manager (Parkland)	Shower Refusal Documentation	✚ Monitor/audit resident shower refusals on the unit on a monthly basis, to ensure refusal and reason for refusal are documented in progress notes.
Case Manager (Willow Park)	Chemical Restraint Usage	✚ Decrease the percentage of residents on inappropriate chemical restraint medication to less than 25% on the unit.
Case Manager (Fairview)	Antipsychotic Usage	✚ Maintain antipsychotic use on the unit below 25%.

Southwood Care Centre - Special Care Unit (SCU)

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Clinical Team Leader / Recreation / Rehabilitation	Code White	✚ Identify potential underlying factors to address and potentially minimize the use/activation of a 'Code White' (i.e. 'Resident to Resident' Physical Aggression incident) on the SCU unit.
Case Manager	Chemical Restraint Usage	✚ Reduce the use of chemical restraints on the SCU unit by 25%.

Southwood Hospice - Type C CCH (Hospice)

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Clinical Team Leader (CTL)	Honor Walk	✚ Implement a standardized Honor Walk protocol in the Hospice unit, enhancing staff perception of meaningful work in hospice thus improving staff morale on the unit within six (6) months. ✚ Implement the Honor Walk on the Hospice unit to reinforce the core values of hospice care: respect; compassion; and dignity.
Case Manager (Hospice)	Medication Errors	✚ Reduce medication errors over the next six (6) months by reducing contributing factors (e.g. interruptions) during medication passes on the Hospice unit.

Kingsland Terrace - Type B CCH (formerly 'Designated Supportive Living')

QI Project Lead / Discipline	QI Project Name	QI Project Goals
Site Administrator	Communication - Resident Focused	✚ Create a collaborative approach in which inter-professional teams work together, in partnership with patients/residents and families to achieve optimal health outcomes.
Recreation	Sensory Program - Taste, Auditory, Touch, Sight and Smell	✚ Implement new Sensory Assessment. ✚ Identify and purchase optimal sensory equipment.