

Excellent Care for All

Quality Improvement Plans (QIP): Progress Report for 2018/19 QIP

The Progress Report is a tool that will help organizations make linkages between change ideas and improvement, and gain insight into how their change ideas might be refined in the future. The new Progress Report is mostly automated, so very little data entry is required, freeing up time for reflection and quality improvement activities.

Health Quality Ontario (HQO) will use the updated Progress Reports to share effective change initiatives, spread successful change ideas, and inform robust curriculum for future educational sessions.

ID	Measure/Indicator from 2018/19	Org Id	Current Performance as stated on QIP2018/19	Target as stated on QIP 2018/19	Current Performance 2019	Comments
1	Number of antibiotic prescriptions written for treatment of Urinary Tract Infections (Count; LTC home residents; September to November 2017; In house data collection)	54507	14.00	11.00	8.00	Excellent initiative with a 42% improvement

Realizing that the QIP is a living document and the change ideas may fluctuate as you test and implement throughout the year, we want you to reflect on which change ideas had an impact and which ones you were able to adopt, adapt or abandon. This learning will help build capacity across the province.

Change Ideas from Last Years QIP (QIP 2018/19)	Was this change idea implemented as intended? (Y/N button)	Lessons Learned: (Some Questions to Consider) What was your experience with this indicator? What were your key learnings? Did the change ideas make an impact? What advice would you give to others?
Create an Antibiotic Stewardship program including lines of accountability	Yes	Integrated into the Health Professional Advisory Committee. Team responsible for initiatives and program
Provide education on Antibiotic Stewardship to Nursing staff	Yes	Antibiotic Stewardship met with resistance at first but team explained rational. Following education staff supportive of program
Implement a Best Practice Algorithm for Urinary Collection	Yes	Provided staff with clear direction on when to collect urine. Good reference for staff
Education on Antibiotic Stewardship for residents and families	Yes	Information sent to families, posted for residents. Unsure of number of residents that read the information

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2	Number of workplace violence incidents reported by Long Term Care workers (as defined by OHSA) within a 12 month period (Count; Worker; January to December 2017; Local data collection)	54507	57.00	68.00	186.00	Initiative resulted in a 226% increase in reporting.

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Implement a new tracking form for Workplace Violence Incidents	Yes	Accessibility of the new tracking form. Challenges: No reports received from disciplines other than nursing. Tracking and trending of reports is manual due to paper based reporting system. Electronic reporting system would help with reporting and trending.
Initiate marketing strategies to increase reporting	Yes	Several emails sent related to importance of reporting. As soon as unit tracking was shared with staff, more reports were received from staff. Unit comparisons created healthy competition between units. Regular discussion at Health and Safety related to reports beneficial.

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3	Percentage of residents who had a pressure ulcer that worsened to a Stage 2,3 or 4 since their previous resident assessment (%; LTC home residents; July - September; CIHI CCRS)	54507	5.20	4.70	5.00	Initiative made improvement but did not reach target. Will be included on the 2019-2020 QIP to further the improvement.

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To provide education to registered full time (FT) and part time (PT) active staff on the use of wound care products	Yes	Education was helpful for registered staff. Challenging to ensure registered staff were freed up from the unit to attend.
To enable full time (FT) and part time (PT) active registered nurses (RN) to complete a wound care course	Yes	Online education completion rate was 100%
Streamline documentation on wounds to clearly capture skin tears vs pressure ulcers	Yes	Helped to define skin tear versus wound. Divided documentation into initial assessment versus weekly assessment
Improve use of skin care interventions	Yes	Created a tracking document to know what product/interventions the resident needed. Help to clarify for each resident. Challenges around follow up with staff related to incidents when interventions were not used appropriately.
Provide education on positioning and skin care interventions to full time (FT) and part time (PT) active personal support worker (PSW) staff	Yes	Provided one pager and in person education sessions. Challenges related to ensuring all staff completed education. Education has been added to orientation.