Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

March 9, 2025



OVERVIEW

Pioneer Ridge is operated by the Municipality of the City of Thunder Bay in partnership with the Ministry of Long Term Care. It is our Vision to be Thunder Bay's Premier provider of Long Term Care and Seniors Services in the Northwest Region.

We are an Accredited facility through Accreditation Canada. We are home to 150 residents and we employ approximately 260 full and part time staff, this includes: administrative, management, nursing, non-nursing and support staff. Under the Pioneer Ridge umbrella you will also find Jasper Place Supportive Housing, the municipal Meals on Wheels program and Homemaking Program. Also located within the Pioneer Ridge building is Grace Remus, a City of Thunder Bay Day Care Program.

Our primary goal is the well-being of each resident by providing quality services, programs and facilities as well as a skilled and caring staff. The promotion and protection of each resident's dignity, privacy, independence and self-determination is a top priority. All residents are treated equitably and fairly in an environment of compassion and care, consistent with our Resident Bill of Rights. An integrated philosophy of care is applied in a consistent pattern that reflects our organization's Mission and Values.

We have worked to align our operational plan with the City of Thunder Bay's vision, values and strategic initiatives, which include:

- * Relationships and Reconciliation;
- * Safety & Wellbeing; and
- * Growth and Sustainability.

We also work closely with our community partners to provide services to a large demographic area with a highly concentrated population. Partnerships include other LTC Homes, Supportive Housing, community organizations, NW Ontario Health Team, Nurse Led Outreach teams, BSO, Hospice Northwest, AdvantAge Ontario and many more. Together with these partners we strive to meet the needs and improve the quality of life and care for our residents.

What's new at the Ridge??

We are honoured to be an RNAO Best Practice Spotlight Organization since 2018: a delegation that demonstrates our commitment to evidenced based practices and ongoing quality improvement. We are currently working on best practice guidelines related to Palliative Care; Dementia, Depression, Delirium; Oral Care and Patient & Family Centered Care.

We have officially started the process of changing our Electronic Health Record provider to Point Click Care. Our goal go-live date is April 1, 2025. This transition brings many benefits for our residents! Point Click Care supports integration with the RNAO Clinical Pathways modules, which will make tracking indicators and outcomes related to the Best Practice work we are doing every day easier to collect and access. This roll-out will also see the implementation of Point of Care charting for our PSW's – a long awaited move from paper based tracking sheets, to electronic recording of care and services in real time.

We will also be transitioning to the new interRAI-LTCF as part of the early adopters group, going live April 1st along with Point Click Care

and the Clinical Pathways.

We have also started implementing a model of emotion-based care (led by Meaningful Care Matters) on our secure unit (Monarch Manor). This project benefits our residents by creating a more home-like environment, as opposed to the institutional environment that has been common in LTC homes. Some of the changes we've implemented so far include: door wraps on all resident rooms on Monarch Manor and all of the 1st floor hallway, bright paint colours on Monarch Manor and all of the 1st floor and Butterfly training for all staff working on Monarch Manor. Pioneer Ridge is proud to be the first LTC home in NW Ontario to implement this model.











ACCESS AND FLOW

Pioneer Ridge works with the Nurse-Led Outreach program through the Thunder Bay Regional Health Sciences Centre avoiding unnecessary hospitalization or emergency department visits. We have a full time Nurse Practitioner on-site 5 days per week, and she is available to support our Jasper Place tenants as well. She works with us to ensure we can provide our tenants and residents with the care they need, in their home and avoid unnecessary ER visits as best as possible.

As part of this initiative, we maintain a tracking sheet explaining the reason for the hospital transfer should it be necessary. This helps us to identify trends, and determine if more training for staff or reassurance and support for families/residents is required.

Jasper Place also manages a Homemaking program contracted through Bayshore. This initiative provides homemaking services to eligible clients (ODSP, Financial Assistance) which includes laundry (if they have facilities onsite only), meal prep and light housekeeping. Assessments are completed by Jasper Place's tenant counsellor on an annual basis in the clients home to determine ongoing need and ensure they qualify financially. Once qualified, the Program Manager at Jasper confirms the number of hours and the services each client requires and sends this information to Bayshore, who assign a staff member to the client. This valuable partnership helps seniors living in the community to stay in their homes as long as possible.

EQUITY AND INDIGENOUS HEALTH

Pioneer Ridge continues to work on developing an Equity, Inclusion, Diversity, and Anti-Racism plan to ensure we are providing diverse, inclusive and safe care for all residents.

Training for all staff and managers will continue in Surge Learning. 2025 course content includes:

Cultural Competence and Indigenous Cultural Safety (4 part series) From Awareness to Action: Indigenous Cultural Safety, Humility and Anti-Racism (6 part series)

This education is also part of our larger strategic goals of Reconciliation and Relationship Building.

We are also looking at bringing in more local and indigenous art, partnering with Indigenous organizations in the community to arrange education for staff and residents and reviewing our policies to ensure they reflect more than just western medicine / recommendations and cultures (i.e. smudging policies, sacred medicines).

PATIENT/CLIENT/RESIDENT EXPERIENCE

We continue to receive input from residents (or families, on behalf of residents) through our Resident Satisfaction Surveys. These surveys are accessible anytime on our website and paper copies are available on request. Annually, we hold a "survey blitz", sending out surveys and providing assistance to residents as needed. We also provide a copy of the surveys to residents/families at care conferences and we send out regular reminders regarding the ability to make suggestions / provide feedback any time of the year through our 4C's program or the satisfaction surveys.

We also provide a Family and Caregiver Experience survey, which provides opportunities for families and caregivers to provide feedback and suggestions from the caregiver perspective.

We review the resident and family satisfaction results quarterly, during our Continuous Quality Improvement committee meetings and use the results to determine potential quality improvement initiatives. We also interact with resident and family councils regularly to obtain their input on QI goals, programs and services. We are always looking for input to ensure we provide the best possible service / outcomes for residents.

We identify initiatives where having regular external input may be beneficial and we have added resident and/or family membership to many of our committees and working groups, for example our Pleasurable Dining Committee and Palliative Care Committees.

PROVIDER EXPERIENCE

It continues to be a challenging time for us with unprecedented human resources challenges. We continue to work to improve workplace culture, look into recruitment incentives, and improve the student placement and recruitment experience in order to manage current health workforce challenges.

Our Student Placement Coordinator continues to focus on increasing the number of student placements and improving the quality of the placement experience, to increase the chances of recruitment. They also visited our local College to do a short presentation for students, highlighting the opportunities we provide and showcasing our organization in hopes to increase the number of students who choose our facility for their placement. Unfortunately for us, the role is once again vacant and we are recruiting to fill this necessary spot. It is very challenging to fill part-time contract roles.

We continue to offer return of service and relocation incentives for PSW's as part of the Ministry's PSW Initiatives. As of 2024 we are now able to offer a signing bonus of \$8000.00 to new RPN's with a 2 year commitment. Since this was approved in March 2024 we have successfully hired 4 RPN's.

We continue to focus on staff appreciation as part of improving workplace culture and staff retention. In 2024, we held a number of events: staff appreciation events; staff BBQ; Halloween costume contests; selfie stations, bingos, Christmas events with a potluck, draws for turkeys and gift baskets, Elf on the Shelf; and more.

FUN FACT: Our Food Service Manager has a family member who lives in our home, and she often brings her sons and nephews in for visits - last Easter, they helped her "hide" eggs for our residents and staff to find!











SAFETY

The safety of our residents is a priority for our Home. Residents, Families/Caregivers/Visitors and Staff are encouraged to report any concerns. Throughout our home you will find posters with the instructions on how to report an issue, or who to call to escalate a concern, should it not be resolved to their liking. The home also posts the whistleblower policy for residents, families, staff and visitors. The Resident's Bill of Rights are reviewed at the monthly residents council meetings as well.

Aside from supporting and encouraging residents and families to bring forward their concerns, other ways the home supports resident safety include:

- Mandatory Abuse training for all staff, students and volunteers done upon hire/start date and annually
- Tracking and trending of all complaints and reportable incidents
- Medication safety initiatives such as medication incident review and medication room audits.
- Embedded Behavioural Support Team to support our residents living with dementia and mental illness; prioritizing non-pharmacological interventions, implementing creative strategies to decrease triggers and responsive behaviours and providing education and training for staff
- Emergency Preparedness Planning and regular review and practice of Emergency Codes
- Annual review and evaluation of our programs that support resident care and services.

PALLIATIVE CARE

Palliative Care and End of Life care for residents has been a focus at

Pioneer Ridge long before it was a mandatory regulation in the FLTCA. Not only has Pioneer Ridge been providing palliative and end-of-life care for our residents, in their home, for many years - we also provide support and education to our families as they walk through the journey along side their loved ones.

Some of the initiatives we have implemented include:

- * Pioneer Talks A goal to engage and educate families, primarily on palliative and end of life topics. 20 minutes is spent on a presentation from the BPC, NP, MD, or Champion per that topic. 30 minutes is spent on Q&A and discussion amongst family members. This is a quarterly presentation, after each presentation a survey is conducted on what future topics families would like education on. Recent presentations include, "Talk with Doc" (open discussion), "What is Palliative Care vs EOL Care", "Symptom Management at End of Life".
- * Referral to the Resident Counsellor when a resident reaches a PPS of 30% or less, or a significant change. The RC will then call the family to offer a special care conference with the family to discuss EOL processes / goals of care. The conference will include the entire interdisciplinary team. The Physician will attend as well.
- * Access to the Northwest Regional Palliative Care Coach. This coach specifically assists LTCHs with resources and education. At this time, our coach completed an assessment on our needs and is working with us to decide what tools we can use for early identification. The palliative care committee's goal is to improve early identification. The Northwest Regional Palliative Care Coach will provide education as well. The Best practice clinician is in close

contact with the coach. Our Pallitive Care committee also includes a family member, who attended training sessions on Palliative care along side staff, and is considered the "family expert".

*Regular palliative care education opportunities for staff. We send members of our Palliative Care committee each year to the NW Ontario Palliative Care Conference hosted by CERAH. We encourage and support our staff to attend lunch and learns or online education related to Palliative Care when offered in the community. We have successfully hosted CERAH at our facility to provide LEAP workshops and Palliative Care for Front Line Staff workshops on multiple occasions - bringing together staff from LTC homes across NW Ontario for learning and networking.



CONTACT INFORMATION/DESIGNATED LEAD

Tanya Baker: Training, Development and Quality Improvement

Lead. tanya.baker@thunderbay.ca

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

MARCH 18/2025	
Board Chair / Licensee or delegate Commission Community	Socnico
Board Chair / Licensee or delegate Communications Communication	Jea Mas
Smore	
Administrator /Executive Director	
Tanya Baker	
Quality Committee Chair or delegate	
Other leadership as appropriate	