

# West Coast Conference on Aging Pre-Conference Session Toolkit

May 30, 2024





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**AGENDA**  
**Thursday, May 30th, 2024**  
**1:00 PM - 4:00 PM**

Welcome and Introduction	time 15 min
QI overview and intro to OSA	time 20 min
Setting goals and change ideas	time 20 min
<b>TEAM BREAK OUT</b> Set your goal & change ideas	time 30 min
Break	time 15 min
Developing measures	time 20 min
<b>TEAM BREAK OUT</b> Developing measures	time 30 min
<b>Present your project</b>	time 15 min
Wrap up	time 10 min

## TEAM MEMBERS FOR PRE- CONFERENCE WORKSHOP



OFFICE OF THE  
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BRITISH COLUMBIA



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Care Quality Initiative](#)



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# How can the Regional Practice Leads (RPLs) Support You?

## Managers/Directors of Care in LTC



- Support interpretation of data
- Translate research findings to LTC staff, residents and families
- Engage with family councils
- Advocate for LTC home priorities in research
- Collaborate on opportunities to secure grants/funding
- Be a resource for research and QI in LTC

## Researchers



- Sharing plain language research summaries throughout our network
- Spread research evidence across health authorities
- Support with navigating the research process within the health authority (i.e., operational approval, access to LTC sites, etc.)
- Facilitating the relationship with internal stakeholders (i.e., residents, family & staff) to foster, guide, and support the pursuit of research
- Collaborating on research opportunities



- Collaborate/identify health authority priorities in LTC
- Consult on quality improvement and research based initiatives
- Scale & spread of successful LTC research and QI projects
- Enhancing the use of evidence in practice through quality improvement
- Assisting in the development of procedures, and guidelines related to implementing research evidence into practice

# PURPOSE OF TODAY

**TO GAIN THE SKILLS NEEDED TO  
UNDERTAKE AND/OR LEAD A QUALITY  
IMPROVEMENT PROJECT THAT IS  
MEASURABLE, AND EVIDENCE BASED**

*Leave today with:*

1. More knowledge on how to apply QI methods in your workplace
2. How to review & understand data to better inform and track QI work
3. More awareness of what QI projects are possible





# Quality Assurance

vs

# Quality Improvement

## FOCUS

Centers around preventing defects and ensuring that specific quality criteria (as defined by the industry) are being met.



## FOCUS

Seeks to identify areas for growth and enhance overall quality and efficiency.

## METHODOLOGY

Employs regular checks/audits to ensure product or service quality.



## METHODOLOGY

Relies on data analysis, measurement, and process improvement methodologies.

## USEFUL FOR

Tracking consistency and reliability.



## USEFUL FOR

Helping organizations continuously enhance their processes and outcomes.

## TOOLS

Often uses checklists, audits, and reviews to ensure compliance with standards.



## TOOLS

SMART goals, PDCA cycles, run charts.

# MODEL FOR IMPROVEMENT

What are we trying to accomplish?

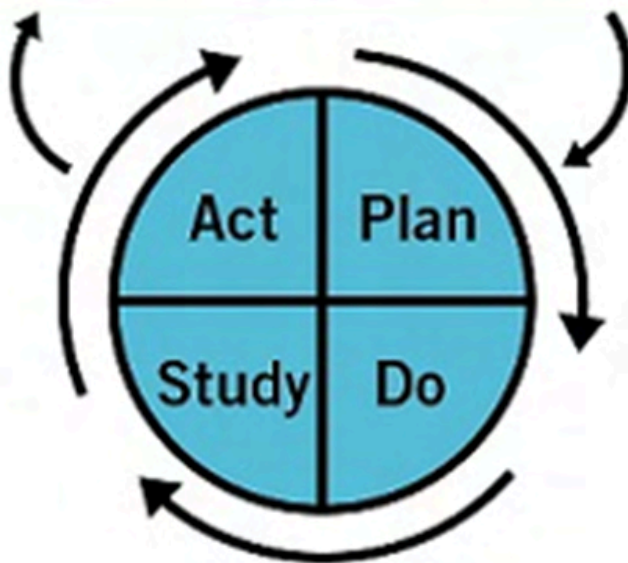
Set a GOAL

How will we know a change is an improvement?

Establish Measures

What change can we make that will result in an improvement?

Change Ideas



# Office of the Seniors Advocate

## Resident Survey Data

### Example of an LTC home's results (section: Top 10, Bottom 10)



#### Top 10 Scoring Questions

Ranked in Descending Order of 2022/23 Percent Positive Score

	2022/23 % Positive Score	2016/17 % Positive Score	YOY Change
*Q36. Resident trusts staff to take good care of them	94.6%	n/a	n/a
Q34. Treated with respect by staff	94.5%	82.8%	11.7%
Q24. Decide when to go to bed	94.4%	74.2%	20.2%
Q43. Staff know what they are doing	94.1%	90.0%	4.1%
*Q38. Resident not treated unfairly by staff due to race or cultural background	94.0%	n/a	n/a
*Q39. Resident not treated unfairly by staff due to sexual orientation (or gender identity)	92.5%	n/a	n/a
*Q48. Staff explains what they are doing when giving care	92.3%	82.1%	10.2%
Q13. Feel safe alone	92.1%	80.0%	12.1%
Q35. Staff respect likes/dislikes of residents	92.0%	82.8%	9.2%
*Q17. Care home smells good	91.1%	n/a	n/a

#### Bottom 10 Scoring Questions

Ranked in Ascending Order of 2022/23 Percent Positive Score

	2022/23 % Positive Score	2016/17 % Positive Score	YOY Change
Q69. Have opportunities for affection/romance	15.9%	0.0%	15.9%
Q68. People ask resident for help/advice	22.4%	25.9%	-3.5%
Q66. Resident is close friend	42.9%	42.3%	0.6%
Q67. People to do things with	44.7%	36.0%	8.7%
Q4. Get favorite foods	44.8%	38.7%	6.1%
Q53. Staff knows life story of resident	47.9%	30.0%	17.9%
Q62. Participated in meaningful activities in past week	47.9%	27.6%	20.3%
Q63. Can participate in religious activities	48.8%	70.8%	-22.0%
Q28. Bathe or shower as often as want	50.0%	20.7%	29.3%
Q57. Have special relationship with staff	51.0%	26.9%	24.1%



# READINESS FOR CHANGE



Answer the questions

## Team

List your team members

Who is your project lead? (i.e., will track project progress)

## Communication

How will you socialize the QI project to the rest of your staff?

How will you socialize the QI project to visitors & residents?

## Obstacles

Are there any time constraints?

What resources are needed? (e.g., funding)

Do you have access to real time data related to your topic or can you create new data?

Have you checked if this has been done before at another LTC site?

# SMART GOALS

Instructions: For each goal, fill in the details according to the SMART criteria. This will help ensure that your goals are clear, focused, and actionable.

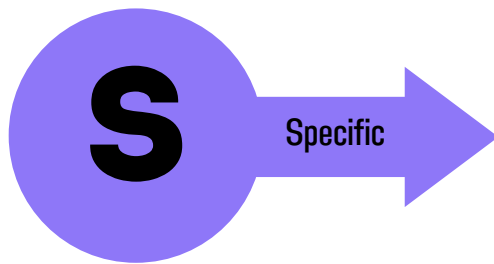
<div>S</div> <div>SPECIFIC</div>	<ul style="list-style-type: none"><li>• What exactly do you want to achieve?</li><li>• Who is involved or responsible? (e.g., just a few care aides, rec staff, nurses, etc.)</li><li>• Where will it take place? (e.g., whole LTC site, just one neighborhood, just a few residents, etc.)</li></ul>
<div>M</div> <div>MEASURABLE</div>	<ul style="list-style-type: none"><li>• Is this something you can measure locally?</li><li>• How will you track progress? How often? (e.g., survey or focus group with staff, residents and/or visitors)</li><li>• What is your starting point? (i.e., baseline)</li><li>• Is there room for improvement?</li><li>• How will you know when the goal is accomplished?</li></ul>
<div>A</div> <div>ATTAINABLE</div>	<ul style="list-style-type: none"><li>• Is this something that can be changed?</li><li>• Is changing it within your control?</li><li>• Do you have the tools/resources to attain it? (i.e., money, staff, etc.)</li><li>• Will meeting the goal challenge your team without defeating it?</li></ul>
<div>R</div> <div>RELEVANT</div>	<ul style="list-style-type: none"><li>• Are you clear about the reason, purpose, and benefit of accomplishing the goal?</li><li>• Does this goal align with your sites values?</li><li>• Will achieving this goal be meaningful for your team and your organization?</li></ul>
<div>T</div> <div>TIME-BASED</div>	<ul style="list-style-type: none"><li>• When will you start working on the goal?</li><li>• What is the target completion date?</li><li>• Are there any milestones or checkpoints along the way?</li><li>• What is the completion date and does that completion date create a practical sense of urgency for you and your team?</li></ul>

# EXAMPLES

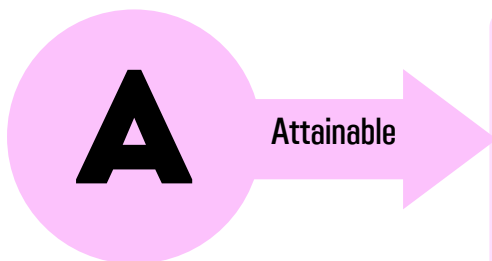
OSA Question (Area for improvement)	GOAL	Change Idea(s)
#62. Participated in meaningful activities in past week	To increase the number of meaningful activities reported by residents by 10% by June 2024.	<ul style="list-style-type: none"> <li>Implementing picture job boards in all neighborhoods</li> </ul>
#53. Staff knows life story of resident #57. Have a special relationship with staff	To improve staffs knowledge of residents background/history and increase meaningful conversations with residents. We will improve by 5% by end of May.	<ul style="list-style-type: none"> <li>Implementing a 'get to know me' poster</li> <li>Training staff on how to engage in meaningful conversations using the poster</li> <li>Discussing life stories of residents in each weekly safety huddle</li> </ul>
#12. If I need help right away, I can get it	To increase the quality of care to residents by providing them help when needed. We will achieve call bell response times <5 minutes by May 14th, 2024.	<ul style="list-style-type: none"> <li>Education on phone use</li> <li>Equipment audit</li> <li>Call bell response protocol map</li> </ul>
#64. Can spend time with like-minded residents #66. Resident is close friend #67. Have people to do things with	To improve social engagement and personal relationships among residents. We will improve Activity Pro engagement scores by 5% by May 31st, 2024.	<ul style="list-style-type: none"> <li>Plan group activities for like-minded residents only</li> <li>Rearrange dining room seating to allow residents to converse better</li> </ul>
#4. Get favourite foods	To increase # of residents who have had a favourite food by June 1st, 2024.	<ul style="list-style-type: none"> <li>Monthly resident food council meetings to discuss menu items (likes/dislikes)</li> <li>Monthly event around food (residents choice)</li> </ul>

**Make your goal...**

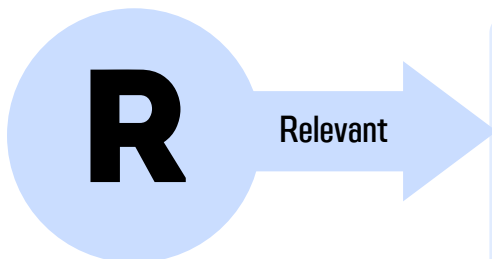
**SMART**



What do you want to achieve?



What changes can you make that will result in an improvement?



Why is this goal important? How will it impact your site?

# FEEDBACK ALONG THE WAY

## Defining MEASURES

- Data or information gathered using simple tools
- Helps you know if you are on track to reach your goal

**DON'T FORGET**

*"All improvement is change, but not all change is improvement"*

## Types of Measures

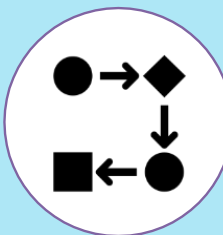
### OUTCOME



Feedback that tells you if your *performance* is improving

i.e., is your change resulting in an improvement?

### PROCESS



Feedback that tells you if your *processes* are changing

i.e., are you doing what you said you are going to do?

### BALANCING



Feedback that tells you if there are unexpected consequences (good or bad)

i.e., are residents quality of life improving but staff burnout is increasing?



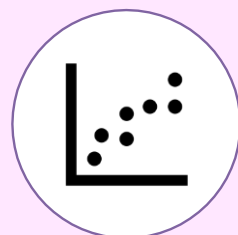
### Keep it SIMPLE



Make data collection quick to do and easy enough to complete

e.g., white board ticks for number of meaningful conversations with residents

### Keep it CONSISTENT



Track it over a period of time

e.g., tracking every 2 weeks for a 3 month period

### Keep it DO-ABLE



Start with a small group to test your change idea

e.g., track for a group of residents or staff not the whole building



# EXAMPLES

GOAL	Change Idea	Process Measure	Outcome Measure
To increase the number of meaningful activities reported by residents by 10% by June 2024.	<ul style="list-style-type: none"> <li>Implementing picture job boards in all neighborhoods</li> </ul>	<ul style="list-style-type: none"> <li>Tracking changes on job board</li> <li>Stickers to track if job board was used</li> </ul>	<ul style="list-style-type: none"> <li>Asking residents, "did you feel you participated in a meaningful activity today?"</li> </ul>
To improve staffs knowledge of residents background/history and increase meaningful conversations with residents. We will improve by 5% by end of May.	<ul style="list-style-type: none"> <li>Implementing a 'get to know me' poster</li> <li>Training staff on how to engage in meaningful conversations using the poster</li> <li>Discussing life stories of residents in each weekly safety huddle</li> </ul>	<ul style="list-style-type: none"> <li># of 'get to know me' posters up</li> <li># of staff trained to use posters</li> <li>Stickers on residents doors tracking # of conversations</li> <li># of stories shared in safety rounds</li> </ul>	<ul style="list-style-type: none"> <li>Pre and post survey to staff: "are you familiar/able to recall details about residents' social history and preferences?"</li> <li>Two questions to residents: 1) Do you feel the staff know your life story? 2) Do you feel staff make time for meaningful conversations with you?</li> </ul>
To increase the quality of care to residents by providing them help when needed. We will achieve call bell response times <5 minutes by May 14th, 2024.	<ul style="list-style-type: none"> <li>Education on phone use</li> <li>Equipment audit</li> </ul>	<ul style="list-style-type: none"> <li># of staff trained/reminded of phone use protocol</li> <li># of phones and intercoms replaced</li> </ul>	<ul style="list-style-type: none"> <li>Monthly call time average</li> </ul>
To improve social engagement and personal relationships among residents. We will improve Activity Pro engagement scores by 5% by May 31st 2024.	<ul style="list-style-type: none"> <li>Plan group activities for like-minded residents only</li> <li>Rearrange dining room seating to allow residents to converse better</li> </ul>	<ul style="list-style-type: none"> <li># of specific group activities offered</li> <li># of conversations at meal times</li> </ul>	<ul style="list-style-type: none"> <li># of residents reporting they have a close friend</li> <li>Activity Pro scores (participation and level of engagement)</li> </ul>
To increase # of residents who have had a favourite food by June 1st, 2024.	<ul style="list-style-type: none"> <li>Monthly resident food council meetings</li> <li>Monthly event around food</li> </ul>	<ul style="list-style-type: none"> <li># of changes made to food menu based on resident food council discussions</li> <li># of events planned with residents' input/advice</li> </ul>	<ul style="list-style-type: none"> <li>Asking the food council committee members, "did you get to eat your favourite food this month?"</li> </ul>

# MEASUREMENT – EXAMPLES

## GOAL

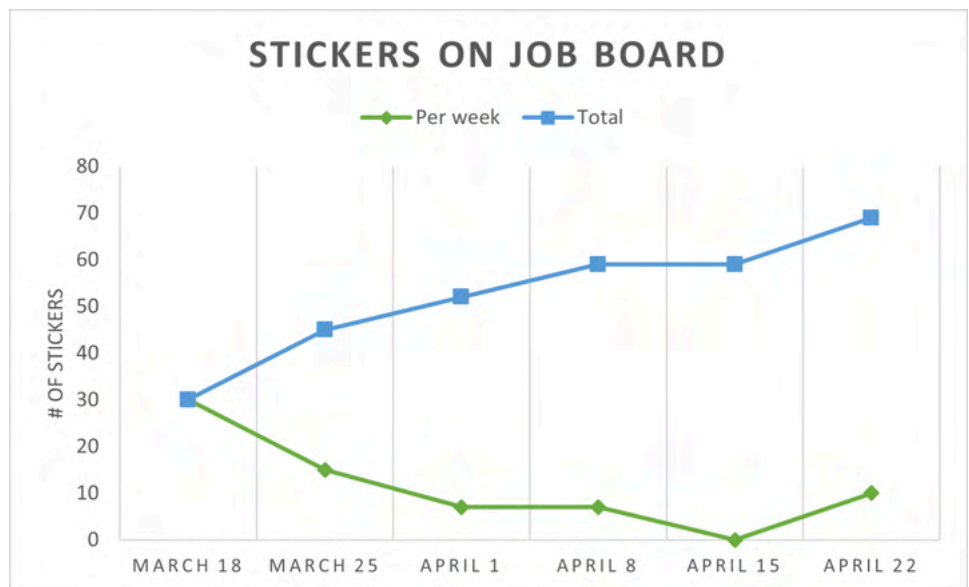
To increase the number of meaningful activities reported by residents by 10% by June 2024.

## Change Idea

Implementing picture job boards in all neighborhoods

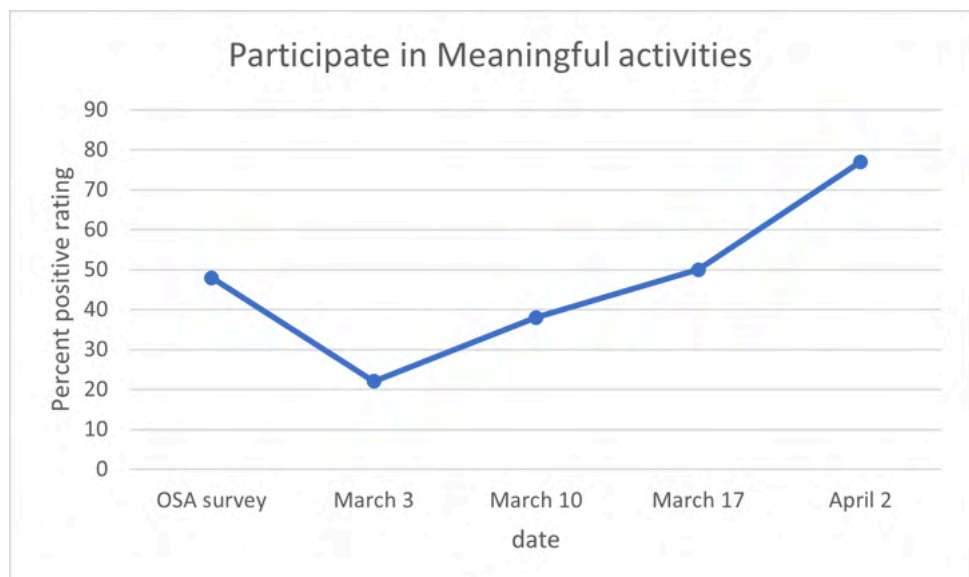
## Process Measure

Stickers to track if job board was used



## Outcome Measure

Asking residents, “did you feel you participated in a meaningful activity today?”



# MEASUREMENT – EXAMPLES

## GOAL

To improve staffs knowledge of residents background/history and increase meaningful conversations with residents.  
We will improve by 5% by end of May.

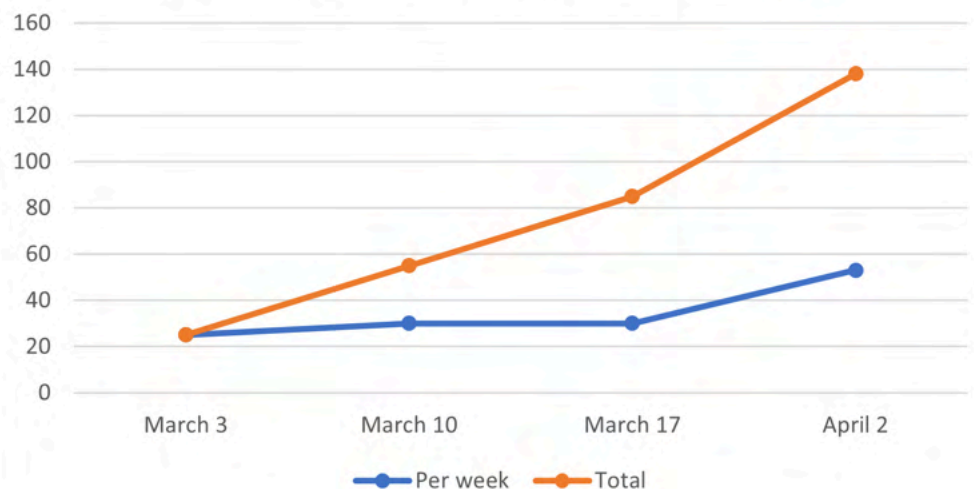
## Change Idea(s)

Implementing a 'get to know me' poster  
Train staff on how to use poster

## Process Measure

Staff leave comments on residents door for each meaningful conversation

Comments on Get to know me Poster board



## Outcome Measure

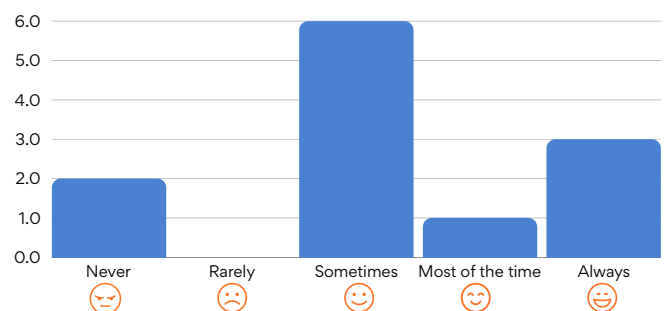
19  
residents

Pre and post survey to staff: "are you familiar/able to recall details about residents' social history and preferences?"

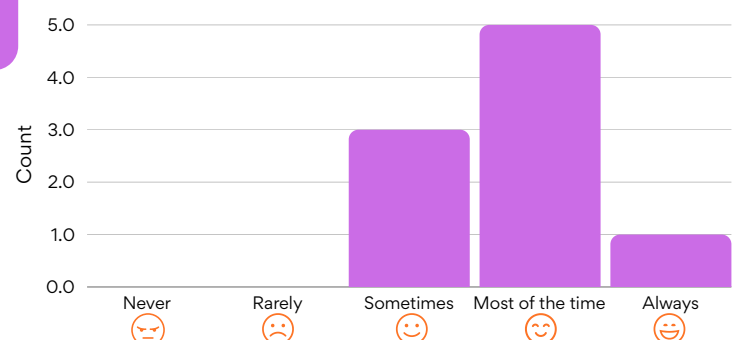
9  
Staff

pre and post survey to residents: "Do you feel staff make time for meaningful conversations with you?"

Do you feel staff make time for meaningful conversations with you?



Are you able to recall details about residents social history and preferences?



# MEASUREMENT – EXAMPLES

## GOAL

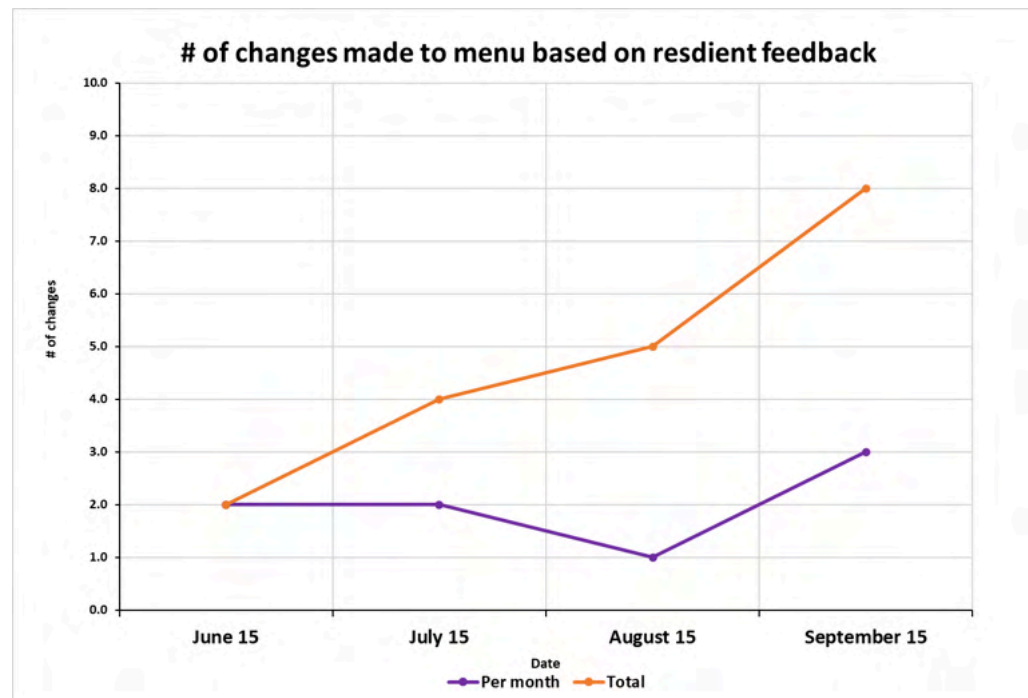
To increase # of residents who have had a favourite food by June 1st, 2024.

## Change Idea(s)

- Monthly resident food council meetings to review menu
- Monthly event around food

## Process Measure

# of changes made to food menu based on resident food council discussions



## Outcome Measure

Asking the food council committee members, "did you get to eat your favourite food this month?"



# MEASUREMENT – EXAMPLES

## GOAL

To improve resident care and teamwork by holding combined shift report on day and evening shifts for 2 neighborhoods with a success rate of 80% by September 30, 2022.

## Change Idea(s)

Hold combined shift report at 0700 and 1500 for all HCAs and nurses on the North unit, rather than 2 separate shift reports at the same times, in the same location, attendance determined by assignment to the East or West wing.

## Process Measure

stickers applied daily by the LPN to a calendar to track whether the combined shift report occurred during the 0700 and 1500 shift reports.



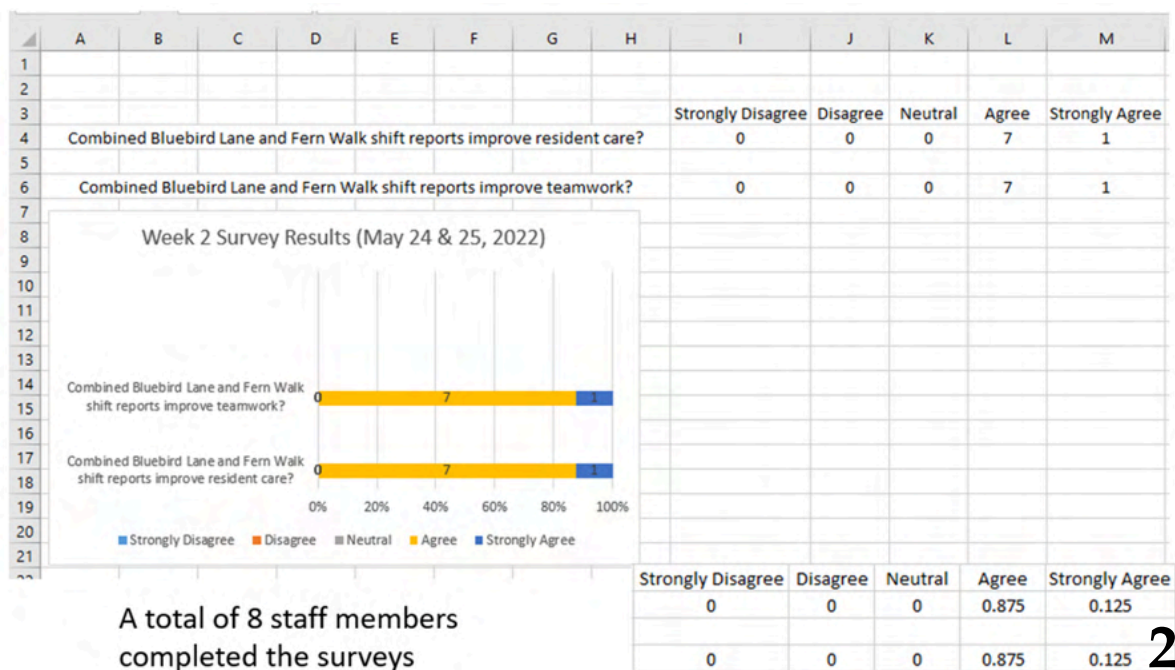
Report done together for both lanes: Day shift (D1), Evening shift (E1) – Green dot on calendar

Report done separately for each lane: Day shift (D2), Evening shift (E2) – Red dot on calendar

Not recorded: Day shift (N1), Evening shift (N2) – Blue dot on calendar

## Outcome Measure

Staff were requested to complete a 2 question Likert scale feedback form



**Make your goal...**

**SMART**



What is your outcome measure?

What is your process measure?

**S**

Specific

Where are you now (i.e., baseline)? Where do you want to be? (i.e., GOAL)

**M**

Measurable

What data are you using? (e.g., survey, interviews with staff, RAI, PCC reports, etc.)

**A**

Attainable

How will your progress be documented? How often? (i.e., excel sheet, white board, run chart, etc.)

**T**

Timely

How often will you reassess your outcome? Who is responsible for this?

## PLAN

Goal:

Change idea(s):

Who are you targeting:  
(e.g., # of residents, certain floor,  
neighborhood, etc.)

Who is collecting the data?:

What data is being collected?:

How often is data being collected?:

How will data be illustrated?:

## DO

What is your baseline:  
(This should be  
collected/determined  
BEFORE implementing your  
change idea(s))

Date to start implementation:

Date to reassess outcome measure:

Any problems or unexpected  
observations:

## ACT

What are your next steps?

a) Adopt

(e.g., you saw great improvement and now you  
want to spread throughout your site)

b) Adapt

e.g., you are going to tweak your change idea  
and reassess in a couple months)

c) Abandon

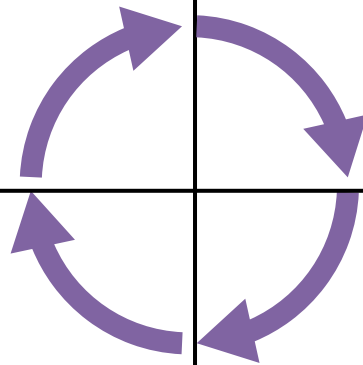
(e.g., you need to think of a different change  
idea and/or outcome measure and do another  
PDSA cycle)

## STUDY

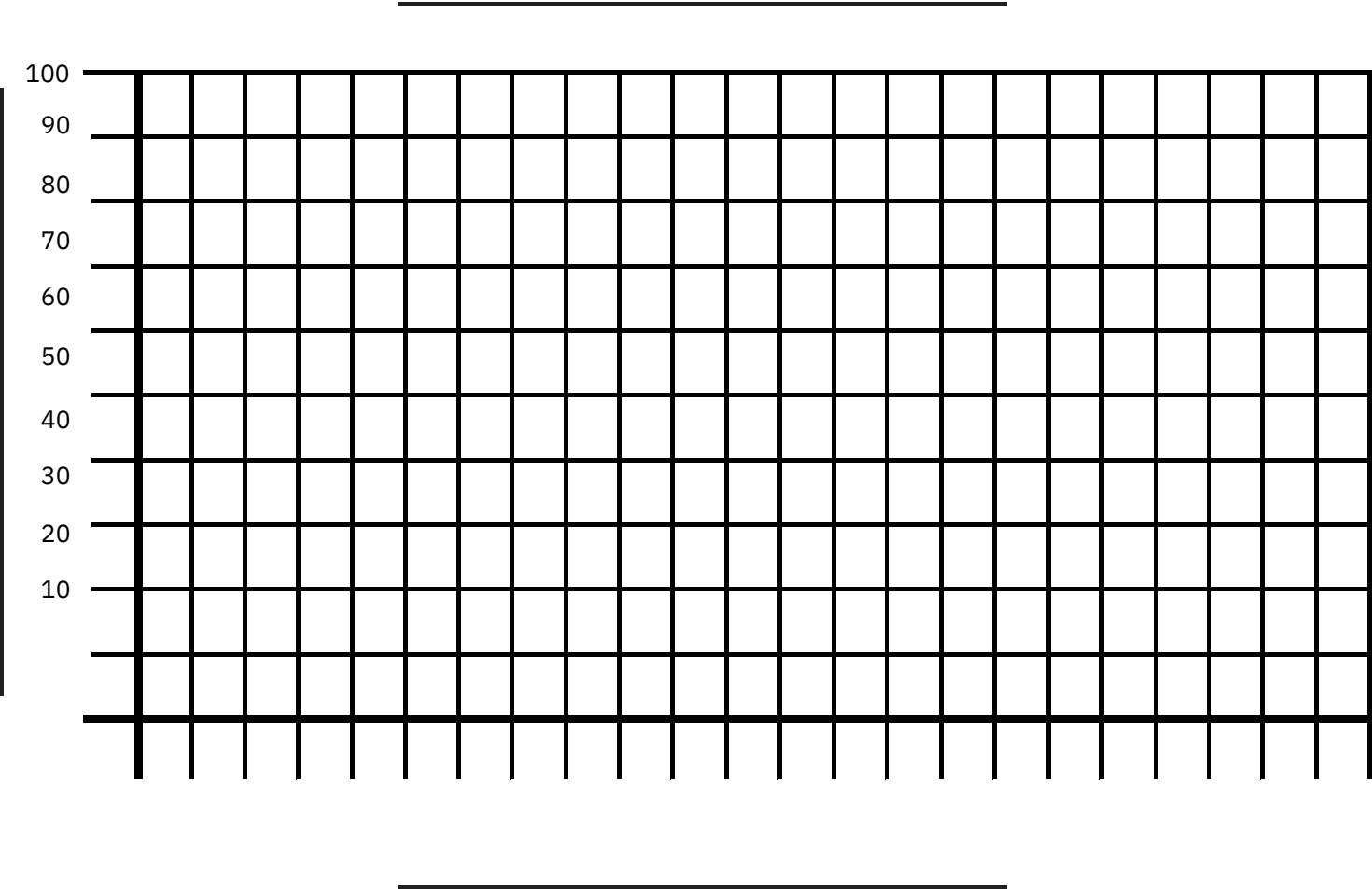
How did implementation of your  
change idea go?:

Did your outcome improve? By how  
much?:

If no improvement, why do you  
think this is the case?  
(e.g., not enough time has passed,  
change idea wasn't working, staff were  
unaware of protocol, etc.)

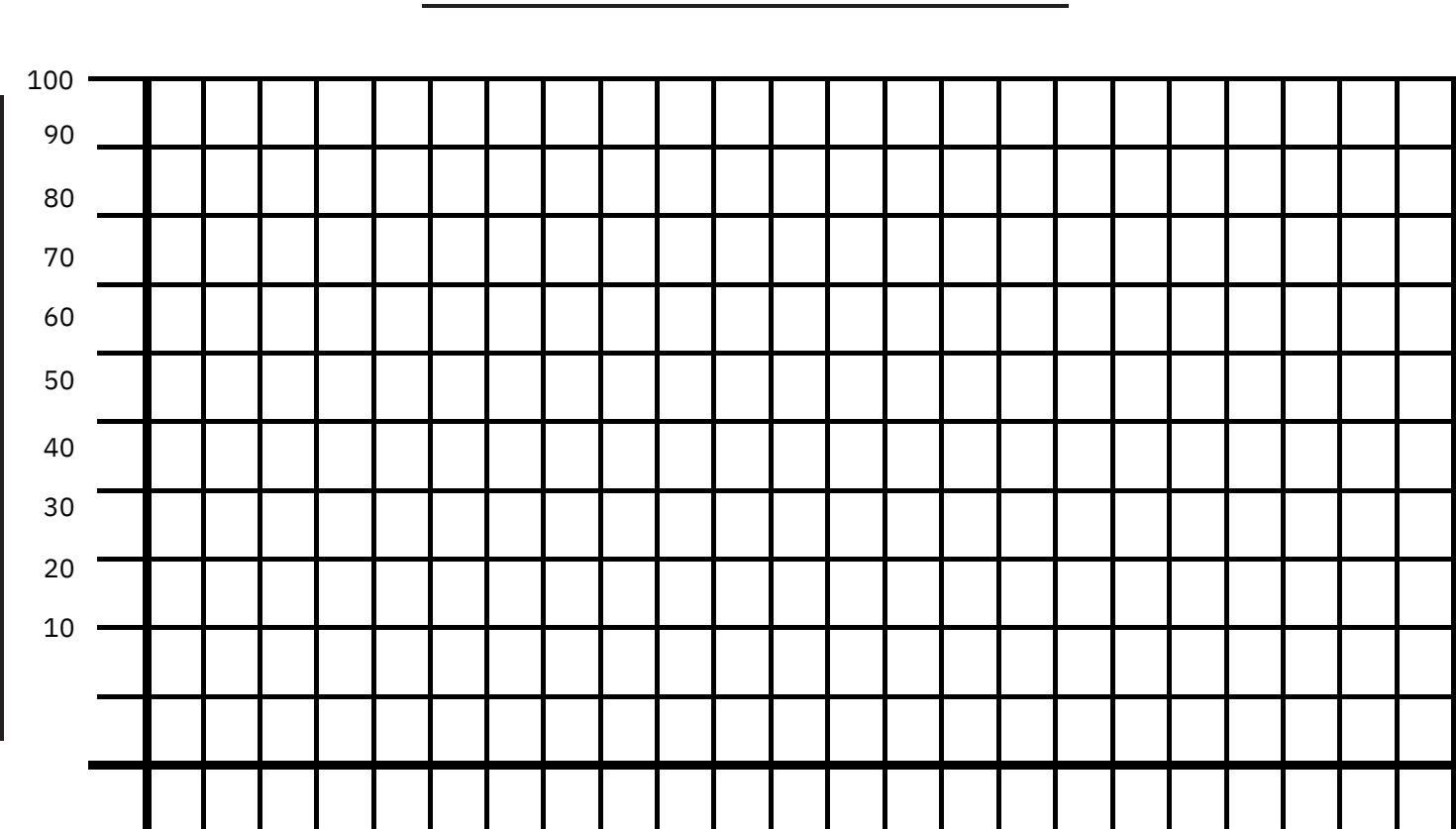


**PRACTICE RUN CHART - PROCESS MEASURE**





PRACTICE RUN CHART - OUTCOME MEASURES



# SUMMARY

1



Share your goal with key members of your team

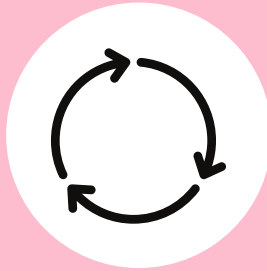


Refine your goal based on your team's input



Define change ideas, key steps, roles and measurement tools

2



## MAKE A PLAN

Plan.  
Do.  
Study.  
Act.

3

## TRACK YOUR PROGRESS



Measure your goal



Share feedback

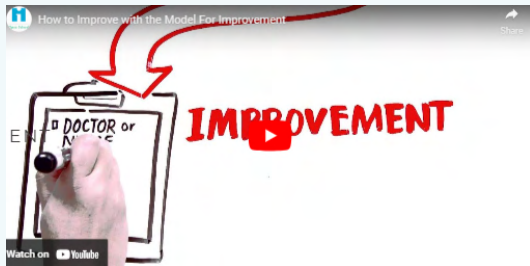
4

## CELEBRATE YOUR SUCCESSES!



# RESOURCES

## INSTITUTE OF HEALTHCARE IMPROVEMENT



[WWW.YOUTUBE.COM/WATCH?V=8C501E6PDVM](https://www.youtube.com/watch?v=8C501E6PDVM)

[WWW.YOUTUBE.COM/WATCH?V=GROBO\\_EZTUY](https://www.youtube.com/watch?v=GROBO_EZTUY)

## OFFICE OF THE SENIORS ADVOCATE

[HTTPS://WWW.SENIORSADVOCATEBC.CA/OSA-REPORTS](https://www.seniorsadvocatebc.ca/osa-reports)



[HTTPS://WWW.YOUTUBE.COM/WATCH?V=YYGQAW6TSWQ](https://www.youtube.com/watch?v=YYGQAW6TSWQ)

## PRE-CONFERENCE WORKSHOP MATERIALS

## PROVINCIAL LONG TERM CARE QUALITY INITIATIVE



## LTC-QI AND YOUR REGIONAL PRACTICE LEADS



[WWW.BCPCM.CA/NEWS](https://www.bcpcm.ca/news)

[HTTPS://HEALTHRESEARCHBC.CA/INITIATIVES/LTCQI/](https://healthresearchbc.ca/initiatives/LTCQI/)

## Participant Notes

## Participant Notes

