

QUALITY MANAGEMENT PLAN

2024 - 2025

CONTENTS

| INTRODUCTION | 3 |
|---------------------------------------|---|
| THE QUALITY PLAN STRATEGIC PRIORITIES | 4 |
| RESPONSIBILITY | 4 |
| REPORTING | 4 |

INTRODUCTION

The delivery of quality services to those we serve has been a Traverse Independence priority over the past many years. As the organization has grown and expanded this is one value and principle that has been constant.

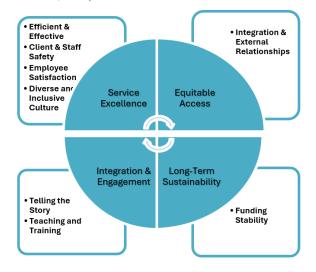
To drive the quest for quality forward, the board of directors have consistently had the expectation of quality service delivery in their strategic plan. It is the board's responsibility to lead the organization forward using the mission statement, vision, values, and the strategic plan. Throughout the history of Traverse Independence, quality has been foundational.

The Board's Strategic Priorities

- Service Excellence
- Integration & Engagement
- Equitable Access
- Long-Term Sustainability

** Service excellence pillar in the strategic plan directly relates to the quality plan; efficient & effective, client safety, employee satisfaction, a diverse and inclusive culture.

As an organization, we are fully committed to a



culture where quality client care is integrated into our programs, thus ensuring our services are provided in an effective and competent manner. The board fosters and supports a culture of client and staff safety and regularly receives reports and updates on measures related to safety such as data on WSIB, lost time claims, accidents and injuries, client falls, medication errors and reconciliation, infection prevention and control and other such data.

As a regional provider, we currently serve clients with an acquired brain injury and with a physical disability across three individual Ontario Health Team catchment areas. Guelph Wellington, Cambridge North Dumfries and Kitchener/Waterloo and the Four Townships. Quality management is necessary to ensure all services are designed and rendered to meet the current and emerging needs of clients, their families, employees, and members of our broader community.

SCOPE

This document applies to all programs of Traverse Independence.

THE QUALITY PLAN STRATEGIC PRIORITIES

The quality plan was developed to support the board's 2024- 2027 strategic plan. Three areas of focus have been selected that support both the Service Excellence and the Equitable Access pillars.

| | | INTEGRATON & ENGAGEMENT |
|---|--|---|
| Safe food-handling practices. Handwashing Falls prevention. Staff training | Internal health data will be utilized to assess effectiveness. Internal health data will be used to assess efficiencies | Refine presence within the three OHTs to support integration of brain injury. Continue to partner, integrate and support OHT members |

RESPONSIBILITY

Quality management is the responsibility of the governors, employees, clients, and caregivers/family. The managers and front-line employees play a part in the quality, reliability, and safety of the programs and services provided to our clients. The board of directors ultimately holds the responsibility for the oversight of the quality plan.

It is up to management to ensure that quality systems are designed, implemented, monitored, and evaluated on an ongoing basis and that the board of directors has the background information they require to support and oversee the plan.

REPORTING

Following is a critical path, which provides the goals, objectives, and measurable outcomes for the quality system along with who is responsible for achieving the measures.

Using a scorecard, the results of the goals and objectives are measured and reported to staff, clients, and the board. The client safety committee will provide regular updates on client safety as a quality indicator.

| STRATEGIC PRIORITY | GOAL | OBJECTIVES | OUTCOMES | LEAD | TIMELINE | INDICATORS |
|---|--|--|---|----------------------------|----------|--|
| SERVICE EXCELLENCE STAFF AND CLIENT SAFETY | Maintain quality food-handling practices. | employees responsible for food | practices will be | Client Safety Committee | Ongoing | Completion numbers will be monitored for completion rates, with a 60% completion averaged across organization annually. |
| | Reduce incidents rec of client injury sys related to falls. Us clie ass clie ass | information will be logged into the GoldCare client record keeping | Client falls data will be used to drive quality improvement across the organization. | Client Safety Committee | Ongoing | 100% of the client falls data will be entered into the client specific GoldCare system. |
| | | prevention assessment tool all clients will be assessed for being at risk of falling | | Client Safety Committee | Ongoing | 100% of clients at risk of falling are offered an individualized falls prevention program |

QUALITY MANAGEMENT PLAN – TRAVERSE INDEPENDENCE

| STRATEGIC PRIORITY | GOAL | OBJECTIVES | OUTCOMES | LEAD | TIMELINE | INDICATORS |
|---|--|---|---|--|----------|---|
| STAFF AND CLIENT SAFETY (con't) | Ensure Consistent | Improve staff knowledge of hand hygiene practices | The staff will be provided training on hand hygiene | Management Team | - 0- 0 | 100% of staff are trained once annually on safe hand hygiene practices |
| | Hand Hygiene Practices | hygiene survey for | Survey outcome indicates satisfactory hand hygiene practices in place. | Committee | | 75% of staff complete survey. Results indicate 80% compliance with hand hygiene practices |
| SERVICE EXCELLENCE EFFICIENT & EFFECTIVE SERVICES | data will be utilized to assess effectiveness. | effectiveness | Quality indicators and quality improvements will be implemented based on standardized data | Director of Client Services and Managers | | Effectiveness of all programs and services will be measured and assessed annually |
| | | efficiency | Quality indicators and quality improvements will be implemented based on standardized data | Director of Client Services and Managers | | Effectiveness of all programs and services will be measured and assessed annually |

QUALITY MANAGEMENT PLAN – TRAVERSE INDEPENDENCE

| STRATEGIC PRIORITY | GOAL | OBJECTIVES | OUTCOMES | LEAD | TIMELINE | INDICATORS |
|--------------------|------------------------------------|---|--|--------------------------------|----------|--|
| ACCESS | Monitor external partnerships | | Partners are satisfied | Management team | ongoing | Accurate data base of all partners maintained with information kept on satisfaction and integration. |
| | Publish health data information | outcomes are validated through data | The quality supports being provided are validated and promoted | Senior Leaders and Managers | ongoing | All partners, the web site and internal stakeholders receive information about validated outcomes. |