

Client Safety Plan

April 2016 to March 2017

Goal	Action	Description	Responsibility	Timeline/Due Date	Indicator
Clients will be safe both in the community and residential	Client risk assessment tools	The Client Risk Assessment Tool will be administered on admission and transfer.	Case Facilitators	ongoing	100% of clients admitted or transferred will have the CRAS administered
services.		The Falls Risk tool will be administered on admission, 24 hour hospital stay, and when there is a change in medical status.	Case Facilitators	Quarterly	Fewer than 5 preventable falls where staff are involved require medical treatment.
	Staff training on assistive devises use	Training to staff on proper use of assistive devices. Training on walking/gait issues and how to assist	OT/PT OT/PT	August 2016	Reduce the number of total falls in the agency
	Root Cause Analysis	RCA completed for all falls exceeding client threshold and falls resulting in medical treatment	Client safety committee member	Ongoing	RCA will be completed within 15 days of fall exceeding threshold Recommendations are reviewed by clinical team at first scheduled review following the RCA
	Quality Care Reviews	Serious incidents or unusual occurrences will be investigated.	Program Managers	Quarterly	100% of recommendations from QCR's will be completed as scheduled

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	Safe Management of Physical Aggression Training	The use of physical interventions will be used only as a last resort	Program Managers	Monthly	There will be quarterly reviews by the SMG trainers to review consistency and program appropriateness
Improve overall health	Urinary Tract Infections	Prospective risk analysis completed with recommendations. Adopt recommendations from Prospective risk analysis	Manager, Rehabilitative Services	October 2016	Reduce number of UTI's in the agency
	Reduction in client smoking	Development of smoking cessation packages	Resource Nurses	Ongoing	All clients that request the package receive the package
		Provide stop smoking education session for clients and families	Managers	Annually	2 sessions will be held annually
	Client Skin assessments	The Skin Risk tool will be administered on admission, changes in health status and at minimum annually thereafter.	Resource Nurses	As needed	No more than 5 level 2 or greater as identified by the Skin Care Protocol scale in residential services
		Monthly skin checks completed by resource nurses in residential services	Resource Nurses	Ongoing	
	Skin Care Training	Resource nurses to complete services specific training as required	Resource Nurses	Ongoing	

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		Training on wound care offered annually in services where needed	Resource Nurses	Annually	
	Survey clients on how they view their overall health	Client satisfaction survey will contain a question related to their feeling of their overall health	Director, Rehabilitative Programs	Annually	Score of 4 or greater
		Provide education on healthy living through group services	Managers	Monthly	12 per year
	Clients will be more physically active	Clients will have a minimum of 30 minutes of physical activity per day built into their daily activity schedules	Case facilitators	Ongoing	90% of clients will have 30 minutes of physical activity built into their daily activity schedule
Medications will be administered safely	Scenarios at service meetings.	Client safety committee members will discuss scenarios related to medication administration at service meetings	Client Safety Committee members	Quarterly	There will be no more than 170 administration errors annually
	Data review in services	Client Safety committee members will review and discuss at services meetings medication documentation error related data	Client Safety Committee members	Quarterly	There will be no more than 140 documentation errors
	Staff Training	All direct care staff will be trained in proper medication administration and documentation	Resource Nurses	Annually	100% of direct care staff will be trained in proper medication practices

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	Safe Medication Training	Safe and appropriate use of PRN medications	Case Facilitators	Quarterly	PRN usage will remain <10 over identified threshold
			Chair Client Safety	Quarterly	Investigations will be conducted for all PRN usage over 10 above threshold
		Annual Medication Audits	Resource Nurses	Annual	Overall annual score of 95%
	Root Cause	RCA completed for all PRN	Client Safety	Ongoing	100% of identified RCA completed on time
	Analysis	usage exceeding client threshold of use.	Committee member		Recommendations are reviewed by clinical team at first scheduled review following the RCA
There will be a safety first culture created in the	Administer the Client safety culture survey	Client safety committee members will organise the administration of the patient	Client Safety committee members	Sept 2016	Overall 75% positive score on the patient safety survey
organization	annually	safety survey in Sept each year.	members	Sept 2016	90% good or excellent score on question 23 of the safety survey.
	Recognise quality improvement initiatives related to client safety.	The good catch program and forms to identify areas where improvement and safety can be enhanced	Chair Client Safety Committee	Quarterly	A minimum of 105 good catches will be identified annually
	Investigate errors and	Implement Root Cause Analysis process for		Ongoing	Root cause analysis will be completed on 100% of medication

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	injuries to improves safety	medication errors with level II adverse events and falls resulting in medical interventions	Chair Client Safety Committee		administration error deemed Level II adverse events Root Cause analysis will be completed on 100% of falls resulting in medical intervention
	Build a culture of quality in services	Services to adopt a quality tracking board to follow service specific client safety data	Client safety committee members	Quarterly	100% of services will track a minimum of two quality indicators important to their service.
	Implement a person centred framework in the organization.	Adopt a person centered framework	Director, Residential services	Sept 2016	Framework adopted
The organization will ensure clients and staff are	Educate new staff	Provide training at orientation and training to new staff	O&T Trainer	Quarterly	Quarterly O&T client safety training will be completed annually
educated in their roll in client safety	Train existing staff on client safety	Provide annual training to staff at services on client safety	Chair Client Safety Committee	Nov 2016	Annual training will be completed each year for each service. Training to be completed by November of each year.
	Training for all staff around policies relating to client safety	Provide review of polices at services meeting	Chair/Service Reps	Dec 2016	Policy review at each service regarding Client Safety related policies

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	Inform staff on their roll in client safety	Provide annual client information session on client safety	Chair Client Safety Committee	Nov 2016	Committee presentation to each services around roll/ function of
	Information session for clients and families	Conduct annual information session for clients and families around their roll in client safety	Chair Client safety committee	March 2017	Client Safety committee and how that relates to staff.
	Training for clients and families	Conduct annual training session on safety for clients and families around safety	Client committee reps	Sept 2016	Friday evening information session held for both clients and families Annual training sessions offered
	Training for Client Safety representatives, managers and resource nurses on Root cause analysis	Conduct review of the 5Why root cause analysis process	Chair Client Safety committee	Sept 2016	Training/refresher Completed
	Clients will be more involved in safety	Develop and adopt a "good catch" form for client use	Chair, client safety	Sept 2016	80 client good catches submitted annually
	54.5.9	Clients will be involved in monthly health and safety inspections of their own space (bedrooms)		Monthly	90% of clients will participate in bedroom safety inspections