



## **REQUEST FOR PROPOSALS (RFP)**

### **Marketing Services - RNAO Long-Term Care Best Practices Program**

**Reference No:  
RFP-2022-01**

#### **IMPORTANT DATES & TIMES:**

**RFP Issue Date:** Thursday January 27, 2022

**Deadline for Inquiries:** Wednesday February 9, 2022

**Proposal Closing Date:** Monday February 14, 2022 @ 4:00 p.m.

**Proposal Closing Time:** 4:00 p.m. Eastern Time (ET)

**Contact:** Janet Chee, Senior Manager LTC Best Practices Program  
[jchee@rnao.ca](mailto:jchee@rnao.ca)

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## 1.0 INTRODUCTION AND SCOPE OF SERVICES

### 1.1 Introduction and Purpose

The Registered Nurses' Association of Ontario (RNAO) invites detailed Proposals from qualified marketing companies ("Proponents") with proven expertise in developing and implementing marketing strategies in the health care sector.

Proponents interested in this opportunity are invited to submit a Proposal.

### 1.2 BACKGROUND

The Registered Nurses' Association of Ontario (RNAO) is the professional association representing registered nurses, nurse practitioners and nursing students in Ontario. Since 1925, RNAO has advocated for healthy public policy, promoted excellence in nursing practice, increased nurses' contribution to shaping the health system, and influenced decisions that affect nurses and the public they serve. RNAO's Best Practice Guidelines (BPG) Program is funded by the provincial government to develop, disseminate, and actively support the uptake and sustainability of evidence-based practices and to evaluate their impact on patient, organizational, and health system outcomes.

RNAO has actively promoted clinical excellence through evidence-based practice in the Long-Term Care (LTC) sector for two decades. Since 2005, the Long-Term Care Best Practices Program has been funded through various branches of the Ministry of Health to support the 626 publicly funded long-term care homes in the province of Ontario.

**Mission:** The mission of the LTC Best Practices Program (BPP) is to enhance the quality of care for residents in LTC homes and foster a culture of evidence-based practice through the implementation of RNAO's BPGs.

**Vision:** Community partnership and collaboration are evident in implementing best practice guidelines successfully.

**Values:** Successful implementation will be achieved by: involving key stakeholders throughout the process, sharing of resources, learning through dialogue, ongoing evaluation and reflection; and developing plans for sustainability.

The LTC BPP is not mandatory. It is staffed by 14 full-time LTC Best Practice Coordinators (Registered Nurses) who work with LTC homes across Ontario. They provide consultation to the homes to increase awareness of the BPGs, build capacity for BPG implementation and sustainability and facilitate access to RNAO's resources. A more detailed description of the role of the LTC Best Practice Coordinators is provided in Appendix B.

Currently, the staff in Ontario's LTC homes are overwhelmed due to the devastating effects of Covid-19, the result of long-term systemic challenges. They face tremendous pressure to provide quality care with severely constrained human and financial resources. The LTC BPP requires increased visibility to better support LTC homes during this time to optimize resident outcomes and reduce staff turnover and burnout by raising awareness of RNAO's BPGs and implementation resources and supporting their transformation into a culture of evidence-based practice.

### 1.3 Scope of Services

RNAO requires a well-qualified marketing company to develop a marketing strategy to promote the LTC BPP and encourage more LTC homes to participate in this government-funded initiative. The strategy should include the following:

1. Development of a 1 year marketing plan for the timeframe March 1 2022 – March 31 2023 that encompasses:
  - a) Refresh of the Program’s branding (i.e., logo, images, key messages) .
  - b) Tactics to target key decision makers in the LTC sector.
  - c) A calendar of activities, events, promotions, and public relations outreaches to be executed during the marketing campaign
  - d) Digital marketing strategy and recommendations for effective channels and platforms.
  - e) An evaluation plan with key metrics to evaluate the effectiveness of the marketing plan.
2. Development of promotional content aligned with RNAO’s brand, in collaboration with the LTC BPP staff, including but not limited to:
  - Refresh of the current promotional materials (Appendix A).
  - Redesign of the LTC sections of the RNAO website to include:
    - Creative written and visual content
    - Integration of the LTC Toolkit website;
    - Promotional information that explains the value of the LTC BPP for LTC homes.
    - Evidence of the Program’s impact (i.e., evidence boosters).
    - Area for LTC homes to request consultative services.
  - Templates aligned with the Program’s refresh (i.e., PowerPoint, emails for sector wide dissemination, pocket folders, newsletters, social media, virtual video background, program banner etc).
  - Digital marketing and social media content with compelling messages, stories and videos;  
Content to support media releases, other public relations activities/events and articles to be published electronically in RNAO’s digital newsletters and Registered Nurse Journal (RNJ)).
3. Development, implement, and analyze the data of a province wide survey to all long-term care homes. The purpose of the survey is to gather information about the needs of long-term care homes and what RNAO can do to support them. Include a report of the findings, analysis of the data, and recommendations to inform future directions of the LTC BPP.
4. Execution of the first 6 months of the marketing strategy.

#### 1.4 Schedule

Activity	Date
RFP Issued	Thursday January 27, 2022
Deadline for RFP Inquiries	Wednesday February 9, 2022
RFP Closing	Monday February 14, 2022 @ 4:00pm
RFP Award Date	Monday February 21, 2022

#### 1.5 Term of Agreement

The initial term of any agreement resulting from this RFP will be for a 13 month period. RNAO reserves the right to extend the agreement subject to the mutual consent of both RNAO and the

selected marketing company. Phase 1 (20%) of the project which includes the completion of the discovery phase and marketing plan must be completed prior to March 31<sup>st</sup> 2022.

### **1.6 Ownership of Materials**

Proponent shall provide all working files to RNAO for any final approved content including video footage, photographs, graphic design, and other completed work.

## **2.0 INSTRUCTIONS TO PROPONENTS**

### **2.1 RFP Inquiries**

All questions or inquiries concerning this RFP must be submitted before 4 p.m. (ET) on January 20<sup>th</sup>, 2022 by **EMAIL** to Janet Chee at [jchee@RNAO.ca](mailto:jchee@RNAO.ca). An email response to the inquiry will be provided by RNAO.

### **2.2 Proposals**

Proponent's Proposals should be complete, clear, consistent, and well organized to facilitate evaluation. Refer to RFP Section 3.0 (Proposal Content Requirements) for information required to be provided in your Proposal.

All pricing should be net and stated in Canadian Funds, with Goods & Services Tax (and Provincial Sales Tax, if applicable) shown separately. All other applicable taxes and other costs are to be included in the net price.

Proposals must be received no later than the RFP closing date and time (the "Proposal Closing") as stated in Section 2.4 and referenced on the title page of this RFP.

### **2.3 Cost of Proposal**

Preparation and submission of a Proposal in response to this RFP is voluntary and any costs associated with Proposal preparation, submission, meetings, negotiations or discussions with RNAO are solely that of the Proponent submitting the Proposal.

### **2.4 No Claim**

RNAO and its representatives, agents, consultants and advisors will not be liable to any Proponent for any claims, whether for costs, expenses, losses or damages, or loss of anticipated profits, or for any other matter whatsoever, incurred by the Proponent in preparing and submitting a Proposal, or participating in negotiations for a Contract, or other activity related to or arising out of this RFP. Except as expressly and specifically permitted in this RFP, no Proponent shall have any claim for any compensation of any kind whatsoever, as a result of participating in this RFP, and by submitting a Proposal, each Proponent shall be deemed to have agreed that it has no claim.

### **2.5 Submission**

Proposals must be submitted before the Proposal Closing by **EMAIL** to Janet Chee at [jchee@RNAO.ca](mailto:jchee@RNAO.ca). An email response to the Proposal submission will be provided by RNAO.

A Proponent may withdraw a submitted Proposal at any time prior to the Proposal Closing by email notification to Janet Chee at [jchee@RNAO.ca](mailto:jchee@RNAO.ca). Late submissions will not be accepted.

### **2.6 Acceptance or Rejection of Proposals**

RNAO is under no obligation to award any Contract(s) as a result of this RFP and reserves the right to cancel the RFP process at any time.

Submission of a Proposal by a Proponent and its subsequent receipt by RNAO does not represent a commitment on the part of RNAO to proceed any further with the Proponent. RNAO reserves the right to accept or reject any Proposal(s), in whole or in part, or to waive any irregularities at its own discretion. Any Contract(s) awarded as a result of this RFP will be based upon the best overall value to RNAO, as solely determined by RNAO.

RNAO reserves the right to negotiate with the selected Proponent(s) to modify its Proposal to best suit the needs of RNAO. If negotiations with the selected Proponent(s) are unsuccessful RNAO reserves the right to negotiate with the next most suitable Proponent(s) and so on until an agreement is reached. RNAO may, at its sole discretion, negotiate with one or more Proponents concurrently.

### **2.7 No Binding Agreement until Execution of a Contract**

By submitting a Proposal, Proponents acknowledge that no Contract exists between them and RNAO until a final agreement is negotiated, and has been approved and executed by the authorized signatories of both of the parties.

### **2.8 Notice of Award**

The successful Proponent will be advised directly by the RNAO on or before the award date referenced in Section 2.4.

### **2.9 No Advertising of Relationship**

The awarding of a Contract will not permit the Successful Proponent to advertise the relationship with RNAO without prior authorization.

## **3.0 PROPOSAL CONTENT REQUIREMENTS**

This section is intended to provide a summary for the Proponent as to the content of the response to this RFP. The Proposal shall be complete, specific and provide sufficient details to allow comparative analysis. In order to receive Proposals in a uniform format, Proponents should structure their Proposal in the order outlined below identifying each section by number.

Proponents are encouraged to include any additional information that may be relevant to their Proposal and which may assist RNAO in the evaluation of their Proposal.

### **3.1 Proponent Information Form**

In this section, provide a completed *Schedule "A" – Proponent Information Form* (Refer to RFP Section 5.0), signed by an officer in the organization responsible for certifying accuracy of all information in the Proposal and with the authority to commit the organization to this project (*or utilize a format similar to Schedule A*).

### **3.2 Executive Summary & Statement of Understanding of Services**

Provide a summary of the key points in your Proposal, which highlights the most significant aspects of your Proposal, and which would differentiate your Proposal and/or company from others.

The Proposal should explain the Proponent's understanding of the Services required by RNAO with an emphasis upon the most important issues and how these issues will be addressed.

### **3.3 Company Overview / Profile**

In this section, provide details regarding your organization including:

- A description of the organization including size, qualifications, years of experience, financial stability.
- Number and location of staff who will be involved in this project.

- A description of marketing activities previous conducted in the health industry in the past five years.

### **3.4 Proponent's Team**

#### **3.4.1 Organization Chart**

If this Proposal involves a consortium or partnership, identify all members and provide information for each member. Also, clearly describe and delineate roles and responsibilities of each party and their relationship and responsibility to the single lead Proponent.

Provide an organizational chart indicating personnel roles & relationships.

#### **3.4.2 Resumes**

Resumes of key personnel, assigned role and identification of the person responsible as:

- Primary Contact Person – Proponents shall identify the individual who shall be the primary contact person for all matters pertaining to this project, and shall be the person responsible for the delivery of service to RNAO;
- Other team members who may supplement the Services provided by the Proponent; and
- Any sub-consultants who may supplement the Proponent's team.

*Key personnel and/or sub-consultant changes during the Contract will not be allowed without the written agreement of RNAO. This contract cannot be sub-contracted to another company in part or in its entirety.*

### **3.5 Experience and References**

Proponents are to include a minimum of three (3) respective client references for which Services similar in size, content and complexity to those required by this RFP have been successfully delivered.

Proponents are to include a minimum of one (1) sample marketing document that is comparable in scope and capacity to the project proposed in this RFP. Note: The client of each sample report can be anonymized for confidentiality reasons if necessary.

Include a brief description of each project, the sample report, the value of the contract and the name(s), telephone number(s) and email address(es) of any individual(s) who may be contacted to comment on the Services provided by the Proponent.

Whereas previous experience with RNAO is not required and does not in any way confer an advantage, RNAO's previous experience with a Proponent may also be taken into consideration in its evaluation of Proposals. RNAO reserves the right to rely upon its records, references and recollection in this regard. With the exception of references as described above, Proposals will be evaluated solely on information contained therein. As such, Proponents should ensure that any information they wish to be evaluated in the context of this RFP should be clearly expressed in their Proposal submission. RNAO reserves the right to only check references of those Proponents with the highest ranked Proposals following evaluation in all other categories.

### **3.6 Capacity**

Proponents should detail their firm's capacity and commitment to provide the required Services to RNAO following the schedule proposed in the RFP.

### **3.7 Approach & Methodology**

#### **3.7.1 General Approach and Methodology**

Provide a description of the general approach and methodology that the Proponent would undertake in providing the Services as described in Section 1.3.

#### **3.7.2 Tools and Methodologies**

Provide a description of the tools and methodologies that will be used by the Proponent's team in providing the Services.

### **3.8 Anticipated Schedule**

Provide an anticipated work schedule in number of days, identifying key dates, milestones and deliverables.

### **3.9 Fees**

Complete and include a *Schedule B– Financial Proposal Form* (Refer to RFP Section 6.0) in this section (*or utilize a format similar to Schedule B*).

- Advise the all-inclusive total lump sum fee and estimated disbursements for each phase of the project. The fee must be inclusive of all associated costs, including consultant's costs, overhead, disbursements, attendance at meetings and preparation of reports and promotional materials
- On a separate spreadsheet, provide a breakdown for each member of the Proponent's team based on their applicable rate and number of hours allocated for each phase/task as quoted above.
- Provide a schedule of hourly rates (excluding applicable taxes) for all individual team members who would be involved in the delivery of the services required by RNAO. This schedule may be used as the basis for determining any additional services which may be required from the successful Proponent.
- The schedule should include any other charges that may be associated with the provision of the Services such as:
  - Any mark-up for reimbursable expenses and/or disbursements, including sub-consultant services and any other legitimate expenses;
  - Other miscellaneous fees, as applicable.

### **3.10 Value-Added Services**

The Proponent has the opportunity to offer and describe any value-added services, products or items not specifically asked for and details as to what the Proponent is prepared to supply as part of the Contract. Unless otherwise stated, it is understood that there will be no extra costs for these services, however if there are any additional costs pertaining hereto, the summary and explanation of those costs should be included in Section 3.9 (Fees).

## **4.0 EVALUATION AND SELECTION**

### **4.1 Evaluation Committee**

The evaluation of Proposals will be undertaken by RNAO's evaluation committee (the "**Evaluation Committee**"). Evaluations will be subjective and relative to the strength of other proposals received. The evaluations will be confidential and no totals or scores will be released to any Proponent.

## 4.2 Evaluation Process

The evaluation of Proposals will be conducted at RNAO's sole discretion and may include consultation with others, references, industry research, etc. Any information obtained by RNAO, whether provided by the Proponent or not, may be used in the evaluation process.

The Evaluation Committee will evaluate Proposals based on the best overall value to RNAO, in its sole discretion.

The Evaluation Committee is not obligated to complete a detailed evaluation of all Proposals and may, at its discretion, after completing a preliminary review of all the Proposals, identify and drop from the detailed evaluation any Proposal that it deems is not in contention to be recommended for final selection.

There will be a two-part evaluation process for this RFP as follows:

### 4.2.1 Proposal Screening:

Proposals will first undergo screening where the Evaluation Committee will determine if:

- the Proposal contains the necessary content, structure and detail to effectively and efficiently evaluate it; and
- any stated mandatory requirements have been met; and
- the financial offering within the funds allocated for this project and can be considered for Contract award.

### 4.2.2 Detailed Evaluation:

Proposals passing the screening process will receive a detailed evaluation based on the criteria stated in Section 4.3 below.

## 4.3 Evaluation Criteria

Submissions will be evaluated on the basis of the overall best value to RNAO based on quality, service, price and any other criteria set out herein. The following weighting have been assigned by RNAO and will be used during the evaluation process:

Evaluation Criteria	Weight
<b>Technical:</b>	
Company – Overview & Structure	5
Personnel – Experience, Qualifications, Capacity for this project	15
Methodology / Approach / Schedule	20
Relevant Projects & Proven Results	15
References	10
Proposal Quality	5
<b>Financial:</b>	
Fee Structure / Cost / Hourly Rates	25
Value Add	5
<b>TOTAL</b>	<b>100</b>

#### **4.4 ADDITIONAL INFORMATION**

The Evaluation Committee may, at its discretion, request clarifications or additional information from a Proponent with respect to any Proposal, and the Evaluation Committee may make such requests to one or more Proponents as deemed necessary. The Evaluation Committee may consider such clarifications or additional information in evaluating a Proposal.

#### **4.5 INTERVIEWS/PRESENTATIONS**

Following an initial review of Proposals, the Evaluation Committee will invite short-listed Proponents to attend an interview with the Evaluation Committee to provide a formal presentation and any additional information and clarifications deemed necessary. The Evaluation Committee will be entitled to consider the information received in any interviews in evaluating Proposals.

#### **4.6 NEGOTIATION OF CONTRACT AND AWARD**

If RNAO selects a Preferred Proponent, then RNAO will enter into discussions with the Preferred Proponent to clarify any outstanding issues and attempt to finalize the terms of a Contract, including financial terms. If discussions are successful, RNAO and the Preferred Proponent will finalize a Contract.

If at any time RNAO reasonably forms the opinion that a mutually acceptable agreement is not likely to be reached within a reasonable time then RNAO may terminate discussions, in which case RNAO may then either open discussions with another Proponent or terminate this RFP and retain or obtain the Services in some other manner.

#### **4.7 CONSULTING SERVICES AGREEMENT**

The Successful Proponent will be expected to enter into a formal Agreement with RNAO. RNAO's standard professional services agreement will form the basis of that Agreement supplemented by the RFP's terms and the successful Proponent's Proposal.

## 5.0 SCHEDULE A – PROPONENT INFORMATION FORM

*All Proponents should fill out this Schedule and submit it with their Proposal*

### **Proponent Information:**

Legal Name of Proponent:

Business Address:

Telephone No.:

Fax No.:

Contact Person (Name & Title):

Contact Person's E-mail:

GST Registration No.:

Incorporation Date:

*I/We, the undersigned duly authorized representative of the Proponent, having received and carefully reviewed all of the Proposal documents, including the RFP and any issued addenda (as acknowledged below), and having full knowledge of the Work Site(s) and the Requirements submit this Proposal in response to the RFP.*

### **SIGNED:**

*Authorized Signatory for the Proponent*

*Date Name and Title (please print)*

**6.0 SCHEDULE B– FINANCIAL PROPOSAL FORM**

All Proponents should fill out this Schedule for all project activities and submit it with their Proposal.

Proponent’s Name:

Activity	Fee (excl. GST)	GST/Other Applicable Tax	TOTAL:
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>SUB-TOTAL:</b>			\$
<b>GST (13%):</b>			\$
<b>TOTAL (including GST):</b>			\$

**Fee Detail Breakdown:**

*On a separate spreadsheet*, provide a breakdown for each member of the Proponent’s team based on their applicable rate and number of hours allocated for each phase as quoted above. The fee must be inclusive of all associated costs, including consultant’s costs, overhead, disbursements, attendance at meetings and preparation of reports and informational materials.

Using the table below (or on a separate sheet) provide a schedule of hourly rates (excluding applicable taxes) for all individual team members who would be involved in the delivery of the Services required by RNAO.

The schedule should include any other charges that may be associated with the provision of the Services.

Name	Role	Company / Sub-Consultant	Hourly Rate
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

**Appendix A: Resources utilized by LTC Best Practices Program for marketing that requires review and updating:**

<b>Item</b>	<b>Print</b>	<b>Electronic</b>
LTC BPP description	✓	✓
LTC Toolkit flyer	✓	✓
LTC BPP brochure	✓	✓
Champions flyer	✓	✓
Evidence boosters	✓	✓
Healthy Work Environment tips and tools	✓	✓
List of BPGs	✓	✓
LTC BPC contact list	✓	✓
Flyers for institutes (Events - Wound Care, BPG, etc.)	✓	✓
LTC-Best Practice Spotlight Organization 1-pg flyer	✓	✓

See Appendix B for more details about the LTC Best Practices Program and weblinks for different components of the program.

## Appendix B: Long-Term Care Best Practices Program Description handout



### Improve Outcomes with Practices That Work

Long-term care homes that make use of the **Long -Term Care Best Practices Program** <http://rnao.ca/ltc> improve outcomes by using proven practices implemented under the guidance of experts. The program provides two invaluable resources: RNAO shares best practices that are grounded in research and practice, while coordinators work with homes to implement those practices in ways that are sustainable.

**RNAO Clinical and Healthy Work Environment (HWE) Best Practice Guidelines**  
<http://rnao.ca/bpg/guidelines>

Since 1999, RNAO has created more than 50 Best Practice Guidelines (BPGs), including many that help LTC homes better care for residents and build a healthy work environment. Each guideline is grounded in evidence gathered and analyzed by teams of experts that include people from different professions, a systemic approach necessary for LTC homes depend upon nurses and interprofessional teams.

The **LTC Best Practice Coordinators** (LTC BPC) work with LTC home leaders, nurse practitioners and point-of-care staff to improve care of residents and their families by adopting practices based clinical BPGs recommendations. Best Practice Coordinators work with home in each of Ontario's fourteen regional health networks, all able to tap into resources at RNAO, so homes can learn to not only adopt best practices but do so effectively by leveraging strategic leadership, finance and administration, information management and technology, and implementation science. The potential impact is massive: Ontario has 629 LTC homes with a total of 78,872 resident care beds and plans by the provincial government to add 15,000 more.

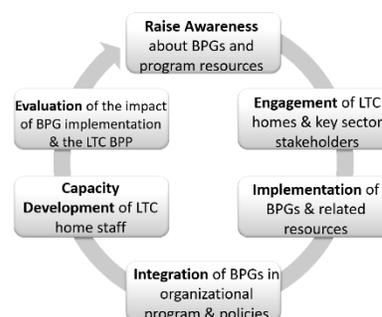
<http://rnao.ca/bpg/initiatives/longterm-care-best-practices-initiative/implementation>

The main focus of Best Practice Coordinators is to:

- Promote the use of evidence-based best practices.
- Collaborate with those in the home to develop plans that can be sustained and spread.
- Teach those who work in the homes how to develop and sustain evidence-based practice
- Support homes to integrate evidence-based practice into mandatory quality improvement plans.

Best Practice Coordinators use six strategies to support LTC homes in making use of BPGs:

- **Raise Awareness** about BPGs and program resources
- **Engage** LTC homes and key sector stakeholders
- **Implement** BPGs and related resources
- **Integrate** BPGs in organizational programs and policies
- **Teach** LTC staff to implement and sustain BPGs
- **Evaluate** impact of BPGs and Best Practice Coordinators



**Toolkit: Implementation of best practice guidelines (2<sup>nd</sup> ed.)** <http://rnao.ca/bpg/resources/toolkit-implementation-best-practice-guidelines-second-edition> helps LTC homes to make the best use of clinical and healthy work environment BPGs by showing how to implement them in a systematic way that is based on the science. The Toolkit shares stories of how other LTC homes implemented BPGs and document the results of those efforts in what we call evidence boosters. This toolkit pinpoints challenges and strategies to overcome them. Your home will benefit from the experiences of others. <http://ltctoolkit.rnao.ca/stories/stories-all>

The **Long-Term Care Best Practices Toolkit, 2<sup>nd</sup> ed.** <http://ltctoolkit.rnao.ca> is an online collection of resources and tools that guide staff, nurses, educators and leaders in LTC to access the best evidence to develop, implement, enhance and evaluate BPGs. This Toolkit also helps LTC Homes to improve performance, integrate relevant provincial legislation, and start other health-care efforts to enhance the quality of resident care and create a healthy work environment.

**Clinical** topics are as follows: Person- and family-centred care

- Falls prevention and management
- Skins and wound care:
  - Assessment and management of diabetic foot ulcers
  - Skins tears: Prevention and management
  - Pressure injuries
  - Ostomy: Care and management
- Continence Care and Bowel Management
- Pain Assessment and Management
- Delirium, dementia and depression and responsive behaviours
- Prevention of abuse and neglect
- Alternative approaches to the use of restraints

- Oral health
- End-of-life care
- Care transitions
- Mental health issues – Suicidal ideation
- Chronic disease management - Stroke

**HWE** topics included are as follows:

- Developing and sustaining nursing leadership
- Prevention and management of violence in the workplace
- Intra-professional collaborative practice among nurses
- Managing and mitigating conflict in health-care teams
- Professionalism in nursing

**Nursing Orientation e-Resource for Long-Term Care** <http://ltcorientationresource.rnao.ca>

The e-Resource is for front-line nurses, nurses in management and nurse consultants whose practice supports LTC homes. Its flexible approach allows nurses to decide which domains and modules to complete based on prior experience, their role in the LTC home and the content of the orientation offered there.

**Domains and learning modules**

Professional	Role	Clinical	Organizational
<ul style="list-style-type: none"> <li>• Professional self-regulation</li> <li>• Practising professionalism in nursing</li> <li>• Continuing professional development</li> </ul>	<ul style="list-style-type: none"> <li>• Leadership and communication</li> <li>• Cultural competence</li> <li>• Documentation</li> </ul>	<ul style="list-style-type: none"> <li>• Resident centred-care</li> <li>• Delirium, dementia, depression</li> <li>• Chronic conditions experienced by residents in LTC</li> <li>• Resident safety – medication administration, falls &amp; infection control</li> </ul>	<ul style="list-style-type: none"> <li>• Provincial legislation of LTC</li> <li>• Resident admission and care transitions</li> <li>• Organizational culture and team work</li> <li>• Managing change in LTC</li> </ul>

		<ul style="list-style-type: none"> <li>• Pain and end-of-life care</li> </ul>	<ul style="list-style-type: none"> <li>• Community partners and supports for LTC across the province</li> </ul>
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**Long-Term Care Best Practice Spotlight Organization®** (LTC-BPSO) <https://rnao.ca/bpg/bpsoltc> is modeled after the RNAO BPSO designation and tailored to help LTC homes implement and evaluate the impact of BPGs while cultivating nurses to base their practices on evidence. RNAO supports LTC-BPSO homes through the LTC BPP while Best Practice Coordinators coach those homes' leadership teams to implement BPGs in ways that lead to sustained success.

**Best Practice Champions Network** <http://rnao.ca/bpg/get-involved/champions> teaches LTC home staff to how to systematically implement BPGs. This is provided in various ways: a one-day, in-person workshop, 3-part webinar series, and a self-directed eLearning course. Virtual forums are provided to Champions through the Network for sharing knowledge and resources, as well as supporting the spread and uptake of BPGs. **Best Practice Champions eLearning Course** <http://rnao.ca/bpg/courses/best-practice-champions-elearning-course>

**RNAO events, workshops and institutes** <http://rnao.ca/events>

**Best Practice Institutes** are 3-5 day forums to help LTC staff, leaders and consultants learn about to implement and monitor evidence-based practice in ways that lead to sustained improvement. Recent offerings include:

- Best Practice Guidelines Clinical Institute – Foundational and Advanced Stream
- Best Practices in Wound Care Institute – Clinical and Program Planning Stream
- Motivational Interviewing Workshop
- Nurse Executive Leadership Academy
- Project Management Workshop

**Communities of Practice (CoP)** are local and provincial forums led by Best Practice Coordinators on topics such as falls, pain, continence, neglect, pressure ulcers, responsive behaviour, nursing leadership and prevention of elder abuse. Content is base by RNAO BPGs and a systematic approach to implementing best practices.

**Implementation Resources for LTC** <http://rnao.ca/bpg/implementation-resources>

**Clinical**

- [ABCs of BPGs: A Workbook for Long-Term Care Nurses](#)
- [Assessment and Management of Pain in the Elderly - Learning Package Long-Term Care](#)
- [Assessment and Management of Pressure Ulcers - Education Program](#)
- [Continence Care Education: A Self-Learning Package](#)
- [Continence/Constipation Workshop for RNs in Long-Term Care](#)
- [Falls Prevention: Building the Foundations for Patient Safety, A Self-Learning Package](#)

**HWE**

- [Developing and Sustaining Interprofessional Health Care: Tips and Tools for Health-care Teams](#)
- [Educator's Resource: Integration of Best Practice Guidelines](#)
- [Managing and Mitigating Conflict Tips and Tools for Nurses](#)
- [Managing and Mitigating Fatigue Tips and Tools for Nurses](#)
- [Preventing & Managing Violence Quick Tips and Tools for Nurses](#)
- [Sustainability of Best Practice Guideline Implementation](#)

- [Positioning Techniques in Long-Term Care: Self-directed learning package for health care providers](#)
- [Toolbox for Implementation of a Falls Prevention Program in Long-Term Care](#)
- [Transdisciplinary Patient/Client Continence and Bowel Assessment Tools](#)
- [Tips and Tools for Nurses on Developing and Sustaining Nursing Leadership](#)
- [Toolkit: Implementation of Best Practice Guidelines, Second Edition](#)

**Online Courses** <https://elearning.rnao.ca/>

- Delirium, Dementia, and Depression in Older Adults
- Preventing and Addressing Abuse and Neglect of Older Adults

**Projects and Initiatives** <http://rnao.ca/bpg/initiatives>

- [Addressing Abuse of Older Adults- An RNAO Initiative](#)
- [Promoting the Awareness of Elder Abuse in Long-Term Care](#)

## CONTACT US

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