

CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2024-25

DESIGNATED LEAD:

Michellle Uprichard, General Manager

QUALITY IMPROVEMENT PRIORITIES 2024-25:

- 1. Continue to improve or maintain the number of residents who experience wound progression, by identifying trends, education, and connect with external support to assist with improvement of advanced wounds.
- 2. Continue to focus on reduction of the use of antipsychotics for resident without a diagnosis of psychosis, we will identify trends, focus on new resident and provide education through our external partners.
- 3. To improve our residents feeling of personal control by conducting a survey, asking residents their preferences and routines around when they go to bed, updating care plans to reflect their choices and educating for team members.

PROCESS TO DETERMINE PRIORITY AREAS:

- 1. Wound care continues to be a focus as we are above the provincial average as per the most recent CIHI results.
- 2. Reduction of antipsychotic remains a priority, the most recent CIHI results indicate usage that is above our organizational average.
- 3. We identified the need to improve customer service through the results of the 2023 Quality of Life Survey which showed a decrease in personal control scale.

In order to determine the priority areas, we met with our Residents' Council, and presented the priorities to our Continuous Quality Improvement Committee. We asked the committee and Residents' Council for their input, recommendations, questions, and approval of these priority areas.

PROCESS TO MONITOR AND MEASURE PROGRESS, IDENTIFY AND IMPLEMENT ADJUSTMENTS, AND COMMUNICATE OUTCOMES:

- 1. We will continue to review our CIHI statistics to determine improvement based on Ontario benchmarks for the Skin and wound program and use of antipsychotic medications. We will also conduct internal CQI audits and analyze the results.
- 2. The Resident Council and CQI Committee with be given status updates throughout the year as they are available.

RESIDENT & FAMILY/CAREGIVER EXPERIENCE SURVEYS:

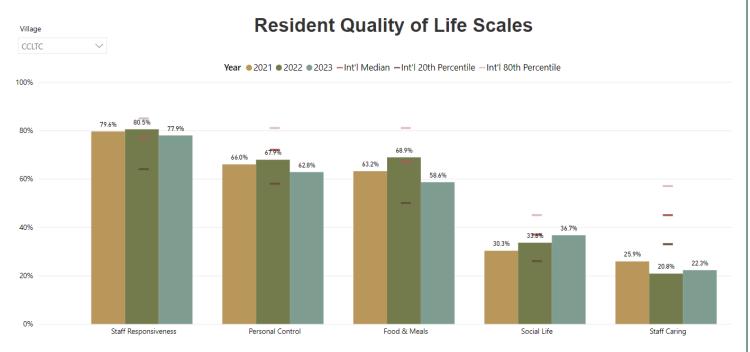
Schlegel Villages measures resident and family/ caregiver experience using the interRAI Self-Reported Quality of Life Survey and the interRAI Family Survey on Quality of Life. The survey is made up of a number of statements, and participants are asked to respond with how frequently the statement is true for them – Never, Rarely, Sometimes, Most of the Time or Always. The validated surveys are used internationally and allow for benchmarking across organizations and countries.

Resident survey: Residents who are able, are given the opportunity to complete the survey annually, around the anniversary of their move-in date. Surveys are run year-round (January to December) to help eliminate bias. New residents moving into the Village are ideally offered a survey twice in their first year; three months after moving in and then again around their anniversary.

Family survey: The family survey ran from January 1 to December 31, 2023. Families and caregivers were provided a paper copy of the survey and encouraged to return or complete online. This is provided at admission and annual care conferences. A QR code is always available in the village which links families directly to the survey.

Results of the surveys:

Residents: The interRAI Self-Reported Quality of Life Survey is designed to capture residents' perspectives of life within long-term care. This survey is recognized globally and helps us compare our performance over time and against others. In the survey, residents answer questions about how often certain statements are true for them. InterRAI has created 5 scales, aggregating correlated statements. A snapshot of the report is included below, along with a brief overview. International benchmarks are from 2018. As a village, we are within the band of performance (international benchmarks) for four of the scales, Staff Responsiveness (above median), personal control, food and meals (above median) and social life. We are below the 20th percentile for caring staff. We had 64 residents participate in 2023 compared to 65 in 2022.



Staff Responsiveness Scale (8 items; max score 24): This scale assesses how residents perceive the responsiveness of our teams, covering aspects like getting help, receiving needed services, and being treated with respect. In 2023, our top 2 questions within the scale were "I am treated with respect by the staff" (94%), "I get the health services I need." (100%). An opportunity for improvement is "staff respond quickly when I ask for assistance" as it decreased from 65% in 2022 to 42% in 2023. "I get the services I need" scored 16% (compared to organizational average of 80%) this could be due to the general nature of the question.

Personal Control Scale (8 items; max score 24): This scale measures how much control residents have over their daily activities, including going outdoors, choosing activities, and deciding on personal matters. In 2023, 88% of our residents responded positively to "I can decide how to spend my time", and 78% responded positively to decision related to a bath or shower as often as they wanted (compared to organizational average of 55%).

Opportunities to improve were identified for decisions related to when they go to bed (decreased from 72% to 58% and what clothes to wear (64% compared to organizational average of 77%).

Social Engagement/Life Scale (10 items; max score 30): This scale evaluates residents' social interactions and engagement, looking at aspects like participating in activities, making friends, and experiencing meaningful connections. In 2023, 98% of residents responded positively about being able to participate in religious activities that have meaning to them (if they choose). 39% of residents also felt that another resident was their close friend (up from 32% in 2022). Enjoyable things to do on weekends is an opportunity to explore as we only had 3% positivity.

Food Scale (3 items; max score 9): This scale gauges residents' satisfaction with food, including their favorite meals, meal variety, and enjoyment during mealtimes. In 2023, two of the three questions were above organizational average – enjoy mealtimes (77% in 2023) and variety in meals (75% in 2023). Favourite foods is an opportunity for improvement as we scored 16% compared to 46% organizational average.

Caring Staff Scale (5 items; max score 15): This scale focuses on residents' perceptions of the team's friendliness, communication, and responsiveness to their needs. We have opportunities within most of the questions for this scale. Staff knowing the story of my life improved from 17% in 2022 to 30% in 2023. We have opportunities within most of the other questions for this scale.

Family: The interRAI Family Survey on Quality of Life was developed to measure family members' experiences and perspectives. Families are asked 25 questions, 12 are core items which are similar with the resident survey, and 13 are unique to the family experience. Similar to residents, families are asked how often the statements are true. Positive response rates are "most of the time" and "always". Results are summarized by domain. As a village, we received 20 responses in 2023, which is average. We perform well in the majority of domains and are at or above available benchmarks. Opportunities exist within the activities and belonging domains.

Family Survey Domains

Year ● 2023 - SVAverage - SQLI 100% 95.2% 94.0% 92.8% 90.5% 88.9% 87.0% 80% 40% 33.3% 20% 0% Comfort Items Visiting Trust Staff Safety'& Security Food'& Meals Communication Respect Engagement in Activities and Experience Care Responsiveness Belonging

How the results were shared:

Survey results were reviewed and shared on February 1, 2024 at the Residents' Council meeting, residents were asked to think about any areas they would like to focus on for 2024, on February 24, 2024 met with Residents' Council and discussed the quality improvement initiative for 2024 and they were in agreement with the areas of focus. The results were shared to the CQI Committee on March 6, 2024, the initiatives were discussed and approved by the committee.

Results are also posted on the Quality Improvement Board, located in the village and accessible to family, residents and visitors throughout the year.

QUALITY IMPROVEMENT IN 2023-2024:

- We improved our wound care program, reducing the number of wounds below the provincial average, this was shared with the Resident's Council on February 1, 2024. And shared with the CQI committee March 6, 2024.
- Float Registered Nurse added in March 2023 to provide support to team members and residents on the night shift.
- In December 2023 we purchased 3 new mechanical bathing stretchers, new beds, mattresses and lifts, which were in use as they arrived in the early months of 2024. This helps to provide better bathing experience and comfort for residents.
- Introduced and implemented one choice menu and "Always Available Menu", which afforded us the ability to provide higher quality meals for our residents, this was implemented in May 2023, it was communicated and discussed at Residents' Council in April 2023. This was also communicated and discussed at resident's annual/admission Care Conferences for the remainder of 2023.
- The purchase of thermo-carts March 2023 and in use by May 2023, providing residents with improved meal service to those who are in isolation.
- Monthly Neighbourhood Team meeting were implemented beginning April 2023, these provide opportunities for leaders to meet with their team and discuss the happenings on their neighbourhoods.