

CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2025-26

DESIGNATED LEAD: Michellle Uprichard, General Manager

QUALITY IMPROVEMENT PRIORITIES 2025-26:

- 1. Decrease the number of resident falls. We will conduct training, implement the 4 P's approach for residents at risk, and improved communication with team members to increase awareness for team members of residents at risk.
- 2. Continue to focus on reduction of the use of antipsychotics for resident without a diagnosis of psychosis, focus on new residents, identify if there is opportunity for decrease/alternative medication or non-pharmacological approach and review residents to assess for appropriate use.
- 3. To improve resident awareness of the services provided in the village to the residents. We will do this with training for team members, sharing information with family and residents, and gather feedback from residents regarding services in the village.

PROCESS TO DETERMINE PRIORITY AREAS:

- 1. Reduction of falls will 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 awareness of services offered to residents through the results of the 2024 Quality of Life Survey which showed a decrease in Staff Responsiveness 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 Falls Program and use of antipsychotic medications. We will also conduct internal CQI audits and analyze the results.
- 2. Leadership team will review Quality Improvement Plan semi-monthly to review progress, identify and implement any adjustments.
- 3. The Resident Council and CQI Committee with be given status updates throughout the year as they are available.

RESIDENT & FAMILY/CAREGIVER EXPERIENCE SURVEYS:

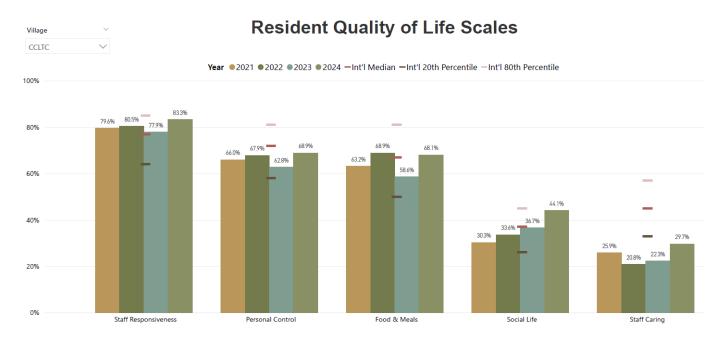
Schlegel Villages measures resident and family/ caregiver experience using the interRAI Self-Reported Quality of Life Survey and the interRAI Family Survey on Quality of Life. The survey is made up of a number of statements, and participants are asked to respond with how frequently the statement is true 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, 2024. Families and caregivers were provided a paper copy of the survey and encouraged to return or complete online. This is provided at move-in 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 65 residents participate in 2024 compared to 64 in 2023.



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 2024, our top 2 questions within the scale were "I am treated with respect by the staff" (95%), "I get the health services I need." (100%). An opportunity for improvement is "I get the services I need" scored 26% (compared to organizational average of 80%) this could be due to the general nature of the question, reviewing the services offered is part of our 202-26 Quality Improvement Plan.

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 2024, 91% of our residents responded positively to "I can have a bath or shower as often as I want" (compared to organizational average of 55%). 89% responded positively to decision related how they spend their time. Opportunities to improve were identified for "I can go where I want on the spur of the moment" (34% compared to organizational average of 40%). As well as being able to easily go outdoors (23% compared to organizational average of 50%).

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 2024, 96% of residents responded positively about being able to participate in religious activities that have meaning to them (if they choose). 55% of residents also felt that they have opportunities to spend time with other like-minded residents (up from 36% in 2023). Opportunities to explore new skills and interests is a possibility to explore as we only had 8% 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 2024, two of the three questions were above organizational average – enjoy mealtimes (86% in 2024) and variety in meals (79% in 2024). Favourite foods is an opportunity for improvement as we scored 26% 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. "I consider a staff member my friend improved from 14% in 2023 to 17% in 2024. 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 2024, which is average. We perform well in the majority of domains and are above available benchmarks. Opportunities exist within the activities and belonging domains.

Family Survey Domains

Year ●2023 ●2024 -SVAverage -SQLI 88.9% 87.0% 87,5% 60% Communication Comfort Items Trust Visiting Engagement in Safety'& Security Staff Food'& Meals Activities and Respect Experience Responsiveness Belonging Care

How the results were shared with residents, their families, Residents' & Family Councils and team members:

Survey results were reviewed and shared on March 19, 2025 at the Residents' Council meeting, residents were asked if they had suggestions on areas they would like to focus on for 2025. On March 19, 2025 we met with Residents' Council and discussed the quality improvement initiative for 2025 and they were in agreement with the areas of focus. The results were shared to the CQI Committee on March 5, 2025, the initiatives were discussed and approved by the committee. Survey results were shared with Team members at Neighbourhood meetings that took place in March and April 2025.

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

QUALITY IMPROVEMENT IN 2024-2025:

- We saw positive changes to how our residents feel about their personal control and their preferences of when they go to bed. Our residents were interviewed by team members about their preferences and care plans were updated as necessary to reflect those preferences. A follow-up discussion was had with Residents' Council in August 2024. This was shared with Residents' Council on March 19, 2025 and with the CQI committee on March 5, 2025.
- Introduction in September 2024 of Instant ordering, a program to assist in the accuracy of diet textures and ordering of meals and snacks for the residents.
- In July and August 2024 there was a re-vamp of Neighbourhood Time Activities, with the purchase of new
 credenzas for both neighbourhoods we were able to make self directed activities more accessible to the
 residents. This was communicated to the Residents' Council in August 2024 after set-up was complete.