



## CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2024-25

### *DESIGNATED LEAD:*

Joanne Balancio, RPN, Director of Quality and Innovation

### *QUALITY IMPROVEMENT PRIORITIES 2024-25:*

Priorities identified for this upcoming year align with our Quality Improvement Plan:

- Reducing resident Emergency Department visits by identifying early recognition of risk and provide residents with preventative care and early treatment for medical conditions that can be treated at the Village. We continue to empower our Float Nurses and utilize Preview ED. We are currently recruiting for our in-house Nurse Practitioner who would take appropriate action to promote better care outcomes for our residents.
- In a Resident's Council meeting in 2023, in response to the questions in the Quality-Of-Life Survey: Residents responding positively to the statement: "I am bothered by the noise". The residents requested to work on decreasing the noise on the Dundas and Trafalgar neighbourhoods. This request was brought to the Quality Committee who agreed with the residents' request. Our Innovation Catalyst is working on this initiative as well and collaborating with the team.
- Reducing the incidence of new and worsening wounds to improve overall clinical outcomes and enhance the quality of life of our residents through prevention, interdisciplinary assessment, implementing best practice guidelines and organizational skin and wound tool/process map.
- Antipsychotic medication reduction for residents without a diagnosis of psychosis to reduce polypharmacy, negative side effects and improve overall quality of life for our residents.

### *PROCESS TO DETERMINE PRIORITY AREAS:*

These areas were determined through review of our performance against available benchmarks and alignment with organizational and provincial priorities. On November 29, 2023, the Quality-of-Life survey results were shared with the Residents' Council and the residents agreed to continue to work on reducing the noise level in the Trafalgar neighbourhood. They were also shared with the Family Council on August 5, 2023.

The Quality Committee agreed with priority areas in the Quality Improvement Plan on November 15, 2023 and again on January 31, 2024. Huddles and discussions with the team also played a large part in identifying areas that require improvement and educational opportunities for our team members, residents and their families. We have collectively decided to continue to work on these same areas as we feel that there could be further improved this year.

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

We will monitor and measure our progress through Committee meetings and audits and will communicate the outcomes of each area through The Quality Committee Meeting minutes. We will share this as well through neighbourhood huddles.

We will review and monitor emergency department visits on a monthly basis with the guidance of our NP STAT team and our in-house nurse practitioner.

Our Registered Team members currently utilize the SBAR tool to collect the information needed prior to the hospital transfer. We also continue to utilize PREVIEW-ED©, an observational tool used by the Village Team to detect the onset/exacerbation of four top causes of preventable ED visits. This tool empowers The Village Team to monitor for changes in several areas (e.g., appetite, mood, mobility) in comparison to the Resident's usual status. The Residents will benefit with improved health outcomes and prevent avoidable visits to the Emergency Department. We will utilize these tools to monitor the progress of reducing Emergency Department transfers.

Last year the team were very cooperative and acknowledged areas that they can improve on in order to decrease the overall noise level. This year, in line with our QIP, we have had meetings with the Dundas and Trafalgar team members to discuss the noise level in the neighbourhoods and have obtained their feedback. We have also had a Town Hall meeting with the residents of the Dundas neighbourhood to present our team's ideas and to obtain feedback from the residents. We plan to have the same Town Hall meeting with the Trafalgar neighbourhood in Summer 2024. We plan to continue to visit both Resident and Family Councils annually to present the results of each survey and to obtain feedback that they can provide for further improvement. We will determine our progress in improvement through the results of the annual Satisfaction Survey, educating at least 80% of our Team Members who work on the Dundas and Trafalgar neighbourhoods, and meeting our goal of 3 opportunities to obtain input from Residents and Team Members.

In addition to Registered Team member education, the referral process for wounds and appropriate usage of wound care products will also be discussed in the Registered Team meetings and on the spot education. We continue to evaluate wounds weekly and also on a monthly basis with the Enterostomal (ET) nurse. We will measure our outcomes through data derived from our RAI MDS tool and will be communicated to the Quality, Skin and Continence and Professional Advisory Committees.

We will review resident antipsychotic medication usage on a quarterly basis and will collect that information using an antipsychotic tracking tool. Registered team members will receive education to review BSO PERT Referral and documentation. We will monitor referral process to ensure registered team is utilizing this process appropriately.

*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 survey was offered to families during care conferences from January to December 2023. Families were also provided an electronic copy of the survey on November 11<sup>th</sup>, 2023 via email and encouraged to complete online. The survey was closed on December 31, 2023 we received a total of 17 surveys from family members.

*Results of the surveys:*

The results of both surveys were shared with the Family Council on August 5, 2023 and this year on March 2, 2024, each from the previous year. Both survey results were also shared with the Residents’ Council on November 29, 2023 and on June 12, 2024.

*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. We had 38 residents participate in the quality of life survey in 2023, compared to 18 in 2022. In 2023, we experienced improvements in the personal control and social life domains. Food and meals has been identified as an opportunity to improve.



**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. 87% of residents responding to the survey felt they were treated with respect by our team, and 80% are able to get the health services they need. This is inline with organizational averages. Opportunities for improvement are, “staff pay attention to me” (dropping from 78% in 2022 to 71% in 2023) and “staff respond quickly when I as for assistance” (dropping from 67% in 2022 to 57%).

**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. Overall, we made significant improvements within this scale, with positivity increasing in 7 questions. In 2023, 91% of

residents surveyed felt they could decide how to spend their time (up from 89%), and 94% felt they could decide when to go to bed (up from 67%). Residents were more positive about being able to easily access the outdoors and go where they want on the spur of the moment (77% and 74% respectively). They could also control who comes into their rooms (77% in 2023 compared to 44% in 2022).

**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. All questions met or exceeded organizational averages. Top answers within this scale include participating in meaningful activities (increased from 39% in 2022 to 77%), and having opportunities to spend time with other like-minded individuals (increased from 44% to 71% in 2023).

**Food Scale (3 items; max score 9):** This scale gauges residents' satisfaction with food, including their favorite meals, meal variety, and enjoyment during mealtimes. Our biggest opportunity for improvement identified through the survey was with "I have enough variety in my meals", as we decreased from 83% to 57%. We look forward to ongoing input from residents at the Resident Dining Committee to seek their advice on further improvement.

**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. Relationships between residents and the team take time; we have established increased hours in care and have welcomed new Team Members to the Village. While we did see an increase in residents reporting that they considered a team member their friend (54%), there was an opportunity identified related to team members knowing the story of our residents' lives (decreased from 61% in 2022 to 26% in 2023).

*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. In 2023, we received 17 responses, compared to 19 in 2022. Our top domain was related to treatment with respect. Our opportunity as per the family was related to activities and belonging.



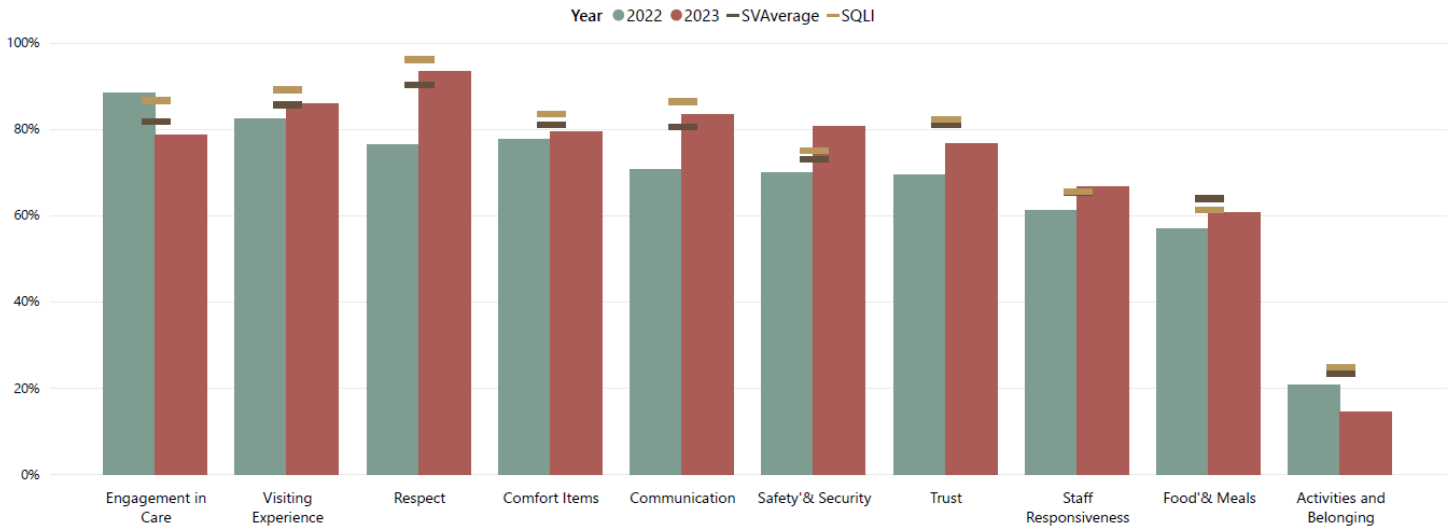
Village 2022 2023  
EMLTC 19 17

Village  
EMLTC

Village  
SVLTC

Year  
Multiple selections

Year  
Multiple selections



### How the results were shared:

Both survey results were also shared with the Residents’ Council on November 29, 2023 and on June 12, 2024 and with the Family Council on August 5, 2023 and March 2, 2024.

The results of both surveys can also be found in the minutes of both Councils, which are available for everyone to view on Main Street.

Both surveys with shared with the Neighbourhood Teams through neighbourhood huddles.

Emails were sent to the families on May 27, 2024, November 11, 2023 and December 12, 2022 that included a letter outlining the purpose and instructions of the survey, including a soft copy, along with a QR code as an option to complete the survey online.

### QUALITY IMPROVEMENT IN 2023-2024:

In January 2023, we have implemented a Float Nurse position for the day and evening shifts. This position consists of an RN who supports the entire Village during the day and evening shifts. We also implemented an in-house Nurse Practitioner who joined the Village on June 3, 2024. There was an installation of 6 ceiling lifts, 1 on each neighbourhood. Each ceiling lift was placed in a shared room and are readily available where the team can accommodate both residents in order to provide optimal, efficient care. In addition to nursing care, we have made our 4<sup>th</sup> PSW on each neighbourhood, day and evening shifts permanent. Previously we had a Volunteer Coordinator on a part time basis, and with the additional duties of student placement, we have implemented a full-time Volunteer and Student Placement Coordinator position. In order to reduce noise, a list of extensions has been provided for all neighbourhoods, including the retirement side in order to reduce paging and to be able to call the intended persons directly.