



CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2024-25

DESIGNATED LEAD:

Daniel Bedard, Director of Quality & Innovation

Victoria Kurzinger (RN), Quality Lead, IPAC Lead, Assistant Director of Nursing Care

QUALITY IMPROVEMENT PRIORITIES 2024-25:

Quality Improvement Plan (QIP): The focus areas of our QIP for 2024-25 were determined based on our resident InterRAI Quality of Life (QoL) surveys, publicly reported metrics and indicators, discussions among leadership, and internal auditing. The priority areas identified for improvement are:

- **Reducing avoidable emergency department transfers** – The Village saw a large increase in emergency department transfers from 2022 to 2023. As a result, we decided to include this quality indicator as a focus for our current QIP. versus in hospital.
- **“Staff know the story of my life”** – Fairview will continue to implement Schlegel Villages’ Living In My Today dementia care program, which emphasizes on developing relationships while understanding the experience of those living with dementia.
- **Reducing the use of antipsychotics without diagnosis of psychosis** – As per organizational and provincial priorities, the Village chose to continue its focus on decreasing the use of antipsychotics for residents without a diagnosis of psychosis.

PROCESS TO DETERMINE PRIORITY AREAS:

Priority areas were determined through analysis of Village trends, discussions by leadership, and review of the resident InterRAI Quality of Life Survey conducted annually with residents. Our Continuous Quality Improvement was consulted to determine priorities and have approved the items in this report at its meeting on April 4th, 2024. The Committee will provide additional review and amendment as necessary.

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

Fairview’s Director of Quality and/or Quality Lead will brief Village leadership on the status of QI initiatives on a regular basis, and in turn will solicit suggestions from the Continuous Quality Improvement Committee. Progress will be measured through publicly reported data, resident QoL surveys, and internal tracking data updated by the Village care team and progress will be reviewed during the Quarterly CQI committee meeting. Further communication of such will be done with team, families and residents during the year via memo’s, family letters and Residents’ Council updates.

Reducing avoidable emergency department transfers:

- To reduce and/or prevent avoidable emergency department transfers, the Village has implemented an effort to increase utilization of the SBAR (Situation, Background, Assessment, Recommendation) format progress note for

our registered team's communication with physicians for all hospital transfers; provide education to residents and families on the benefits of receiving care in the Village

- Conduct a monthly reviews of hospitalization data by analyzing trends and identifying the most common risk factors and then utilize the monthly analysis to develop targeted education for neighbourhood-facing team members.

“Staff know the story of my Life”:

- This year, the Village will: include the ME (My Experience) form in the move-in process and provide assistance for the resident and/or families to complete it; continue the roll-out of “Top 10” boards for each resident's room, which display interests, life goals, or preferences that are important to the resident; and guided huddles with the neighbourhood teams reviewing the above biographical data with the front-line team members to encourage friendly relations between themselves and residents.

Reducing the use of Antipsychotic's without a diagnosis of psychosis :

- All antipsychotic use will be tracked to provide a snapshot of usage at the Village. Our Personal Expressions Resource Team (PERT) lead will review data monthly and determine residents that are appropriate candidates for tapering off this type of medication; our PERT lead will also complete referrals to the Geriatric Mental Health Outreach Team (GMHOT) for appropriate cases to provide additional review and guidance on tapering antipsychotics and non-pharmacological interventions. We will also ensure that new residents receiving antipsychotics are reviewed for eligibility of reduction within 6 weeks of their move-in to the Village.

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 capable of completing the survey 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 move-in anniversary.

Family survey: This survey was launched October 25th, 2023 and closed December 31st, 2023 and is intended to capture the satisfaction of residents' families with the services received in the Village. Families/ caregivers are provided a copy of the survey and encouraged to return a paper copy, or complete online.

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, 3 of the scales are within the international benchmarks, staff responsiveness, personal control and caring staff. Food and meals has dropped to below the 20th percentile and social life remains below the 20th percentile. In 2023, 37 residents participated in the survey compared to 23 in 2022.

Resident Quality of Life Scales



1. **Staff Responsiveness Scale** (8 items): Assesses how residents perceive the responsiveness of our teams. We met or exceeded the organizational and international averages for the majority of questions within the domain. We improved on “if I need help right away, I can get it” as we increased from 74% in 2022 to 92% in 2023, as well as “I get the health services I need”, which improved from 83% in 2022 to 95% in 2023.
2. **Personal Control Scale** (8 items): Measures the extent of residents’ control over their daily activities. Residents responded with over 89% positivity for a number of questions within this scale: deciding where to go on the spur of the moment (89%), deciding to have a bath or shower as often as they want (95%), how to spend their time (92%), when to go to bed (95%), which clothes to wear (100%) and when to be alone (89%). An opportunity for improvement is identified with “I can easily go outdoors”, which dropped from 44% to 32% in 2023 and “I can control who comes into my room”, which dropped from 56% to 32% in 2023.
3. **Social Engagement/Life Scale** (10 items): Evaluates residents' social interactions and engagement. This is an area of opportunity for our village as we were below organizational average for all questions. We did improve from 13% to 19% in 2023 for “another resident is my close friend”, similarly with “it is easy to make friend here” which increased from 13% to 16% in 2023. “Opportunities to spend time with other like-minded residents dropped from 22% in 2022 to 3% in 2023.
4. **Food Scale** (3 items): Gauges residents' satisfaction with food. We were able to maintain performance with variety in meals, scoring approximately 76%. We have opportunities to improve the mealtime experience as we decreased from 74% in 2022 to 43% in 2023, and with favourite foods as we decreased from 61% to 43% in 2023.
5. **Caring Staff Scale** (5 items): Focuses on residents' perceptions of the team's friendliness, communication, and responsiveness to their needs. We are well above the international and organizational averages for “staff ask how my needs can be met” (scoring 87% in 2023) and “staff respond to my suggestions” (scoring 87% in 2023). We have an opportunity with “some of the staff know the story of my life” which dropped from 17% to 8% in 2023, and “staff take the time for a friendly conversation” which dropped from 48% in 2022 to 35% 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”. In 2023, we received 2 surveys back; we continue to encourage family members to respond to this survey.

Quality of Life survey results were reviewed by the leadership team in Jan 2024, and provided to families via letter and memo on Jan 25th 2024. Scores were posted on the Village Main Street for team members to review on Jan 29th, 2024. Results were shared to the Residents' Council by our Resident Support Coordinator, General Manager and Quality Lead on Jan 11th and Feb 8th 2024 council meetings. QOL survey results have also been shared with specific residents who have historically expressed an interest and do not regularly attend council meeting via one-on-one meetings with the GM (4 residents).

QUALITY IMPROVEMENT IN 2023-2024:

QIP Goals: The 2023/24 QIP was a core aspect of the increased focus on quality improvement in the Village. Regular meetings and a dedicated quality lead allowed for more effective monitoring of the ongoing priorities, which were, these were discussed with the Residents' Council by the GM, Quality Lead on Feb 8th 2024 to update and get their input if any on the below indicators. These were also discussed in the CQI committee on June 16th, 2023, September 26th 2023, and communicated via memo to the team on March 13th 2024.

- **“I can express my opinion without fear of consequences”** – Survey results indicated a 4.5% increase in positive responses to this survey question vs 2023. The Village reinforced to residents their right to express their opinion; reinforcing proper methods for approaching residents to provide care through education sessions; and hosting CONNECT-The-Dots training sessions for team members and leadership, which focus on customer service excellence and improving resident comfort and quality of life in the Village.
- **“Some of the staff know the story of my life”** – The Village completed a ME (My Experience) form for all residents; began implementing the aforementioned Top 10 boards; and held regular ME form huddles for the team to familiarize themselves with the residents' biographical information. The Village is continuing to refine and enhance our efforts to promote team-member-resident bonding.
- **Reduction of antipsychotic use without a diagnosis of psychosis** – The Village PERT (Personal Expression Resource Team) lead identified all residents receiving antipsychotics without a diagnosis of psychosis and tracked their use, with the aim of replacing the use of these medications with non-pharmacological interventions to reduce personal expressions. Education on these interventions was provided to neighbourhood teams; residents being tracked were reviewed for titration and referred to the GMHOT (Geriatric Mental Health Outreach Team)

Improvements made to accommodations, services and programs: Over the year the home has undertaken many initiatives to improve the infrastructure and look and feel and services of our building, which is captured via an in-house tracker. Please see below for some of these highlights, these were discussed with the Residents' Council on Jan 11, 2024, for the 2023 improvements and will be discussed with the council in Jan 2025 meeting for the 2024 improvements, as well as communicated via monthly newsletters to the residents and families on the following dates:

Dessert Fridges for the neighborhood Dining's Rooms: Feb 15th 2024.

Upgraded Main Floor dining room food warmers: March 18th, 2024.

Virtual Reality Program Launch: Jan 23rd, 2024.

Virtual 21inch Photo Screens: Nov 8th 2023

Glass Wall Water Fountain: Dec 1st, 2023

New building wide phone/Communication system: Jan 23rd 2023

Electrical Upgrade Feb 4th and Feb 23rd, 2023