

## CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2025-26

*DESIGNATED LEAD:* Cheryl Ridler, Director of Quality and Innovation

### *QUALITY IMPROVEMENT PRIORITIES 2025-26:*

1. Reduce the percentage of Long-Term Care (LTC) residents not living with psychosis who were given antipsychotic medication.
2. Improve the percentage of residents responding positively to: “Staff respect what I like and dislike”.
3. Reduce the percentage of residents who fell in the 30 days leading up to their Minimum Data Set, version 2.0 (MDS) assessment or interRAI Long-Term Care Facilities (LTCF) assessment.
4. Improve the percentage of family members responding positively to: “My family member participated in meaningful activities in the past week”.

### *PROCESS TO DETERMINE PRIORITY AREAS:*

Priority areas were determined following consideration of provincial and organizational priorities. The Village and our Continuous Quality Improvement (CQI) Committee regularly review the Canadian Institute of Health Information (CIHI) quality indicator data and compare performance against available benchmarks. Our Quality of Life (QOL) survey and Family survey data was also reviewed and shared with Resident and Family Councils where feedback was encouraged.

1. The Village of Riverside Glen has identified antipsychotic medication reduction for residents without a diagnosis of psychosis as a focus of our Quality Improvement Plan for the past 2 years. Our Village has seen a large percentage of our new residents moving into the Village already receiving antipsychotic medication prior to move-in. Considering provincial and organizational priorities, review of our Canadian Institute of Health Information (CIHI) quality indicator data, and feedback from our Continuous Quality Improvement (CQI) Committee, our Village has chosen to continue to work on this initiative for 2025-26.
2. In our 2024 Quality of Life survey (QoL), 62% of residents responded positively to the statement: “Staff respect what I like and dislike”, which is below the international median, and organizational average. Based on feedback from our Residents’ Council, the Village will work towards improving this survey statement. This priority is supported by our CQI Committee.
3. Our CQI Committee has reviewed the Canadian Institute for Health Information data for the percentage of residents who fell in the 30 days leading up to their Minimum Data Set, version 2.0 (MDS) assessment or interRAI Long-Term Care Facilities (LTCF) assessment. This quality indicator is currently above both the provincial and organizational averages. Based on feedback from our CQI Committee, this priority area was chosen as a focus for 2025-26, which is in alignment with provincial priorities.
4. Following review of our 2024 Family survey results by our leadership team, “My family member participated in meaningful activities in the past week” was chosen as an area of improvement. This priority is in alignment with our organization’s 2025 aspiration focus: “Create opportunities for meaningful and shared activities” which the

CQI Committee has emphasized as an important focus for the Village. This priority area falls under the Activities and Belonging domain, which was the lowest scoring domain for 2024.

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

1. Tracking the number of residents who reduce or discontinue their antipsychotic medication will enable the Village to monitor progress. Identifying new residents moving into the Village taking antipsychotic medication will allow our Personal Expression Resource Team (PERT) to monitor them as they adjust to their new environment. Reviewing quality indicator data will allow the Village to measure performance, which will be shared with our CQI Committee and Resident and Family Councils.
2. Utilizing our food service software, MealSuite, to highlight food related likes and dislikes and making this available to team members will increase awareness of residents' preferences. Tracking the number of residents who have their preferences entered into our software will allow the Village to measure progress. Team members will be asked to reference these preferences prior to providing meals and snacks, while still offering choice to residents. Resident feedback received from Residents' Council, Food Committee as well as monthly activity planning meetings will assist in identifying and implementing adjustments. Our quarterly QoL results will allow us to measure outcomes.
3. Quarterly data from the Canadian Institute for Health Information (CIHI) will be reviewed and compared to previous performance, as well as to organizational and provincial averages. Additional areas of measure include tracking neighbourhoods that have adopted dedicated care teams which will provide consistency, build trust, and maximize team member expertise and knowledge of resident's individualized needs. Additionally, two neighbourhoods will be completing enhanced safety checks for three residents at risk for falls. Outcomes will be communicated to our CQI Committee as well as our Resident and Family Councils.
4. Family members are welcome to visit their loved ones at any time of day; however, their schedules may not always align with the timing of meaningful activities. Monthly activity calendars and newsletters will be sent to families via email to keep them informed about upcoming events and activities in the Village. Additionally, family members of residents who participate in activities will occasionally receive photos via email of their loved ones enjoying these experiences within the Village. Our 2025 Family survey results will allow us to measure our progress.

*RESIDENT & FAMILY/CAREGIVER EXPERIENCE SURVEYS:*

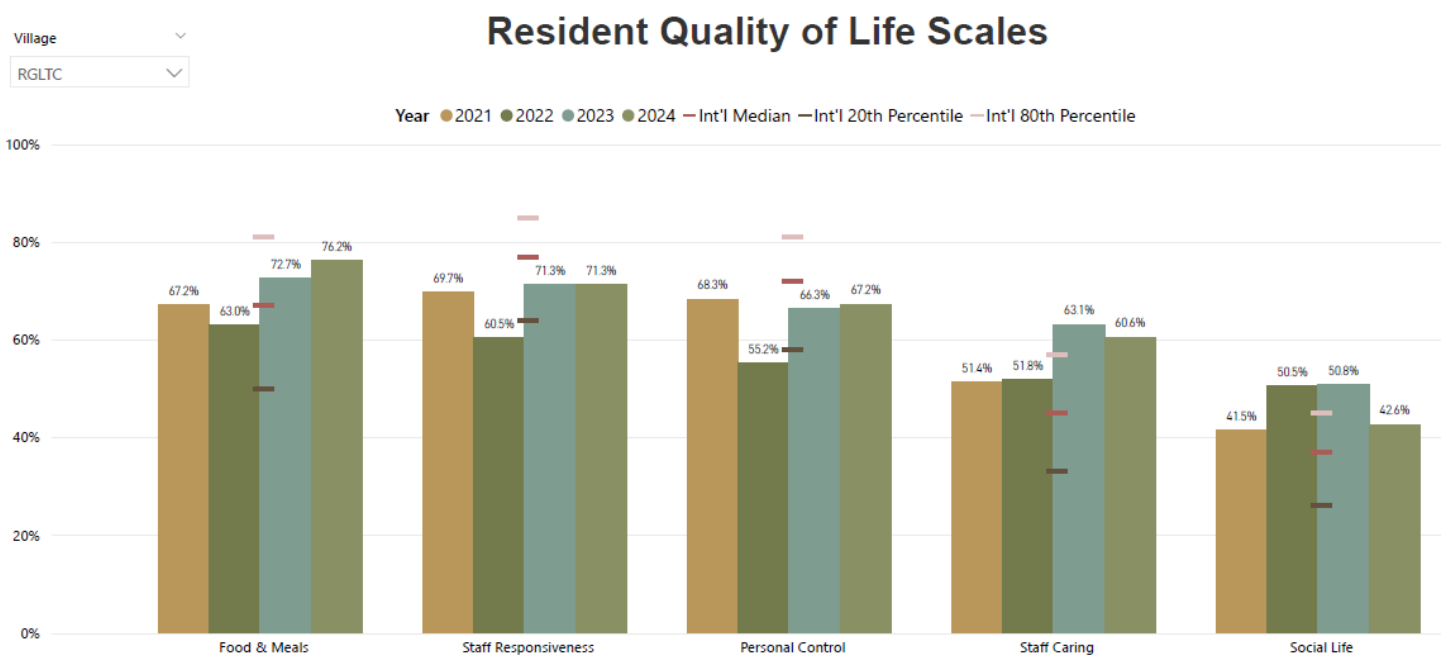
Schlegel Villages measures resident and family/caregiver experience using the interRAI Self-Reported Quality of Life Survey and the interRAI Family Survey on Quality of Life. The survey is made up of a number of statements, and participants are asked to respond with how frequently the statement is true 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:* Families received an invitation from the General Manager via email on October 25, 2024. The survey was offered electronically as well as in paper format, to accommodate multiple methods of completion. The survey campaign closed on November 22, 2024. We received 51 completed surveys in 2024, compared to 23 the previous year.

*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 exceed the 80<sup>th</sup> percentile for the staff caring scale. Results are above the median for social life as well as food and meals. Staff responsiveness and personal control continue within the international band of performance.



**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. We experienced improvements in a number of statements in 2024, compared to 2023. Notable increases included; 86% of residents surveyed felt they were treated with respect by staff (compared to 83%). I get the health services I need (67% compared to 60%); staff respond quickly when I ask for assistance (65% up from 54%).

**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, residents felt an improved sense of autonomy related to controlling who could come into their room, how they spend their time and when they could be alone.

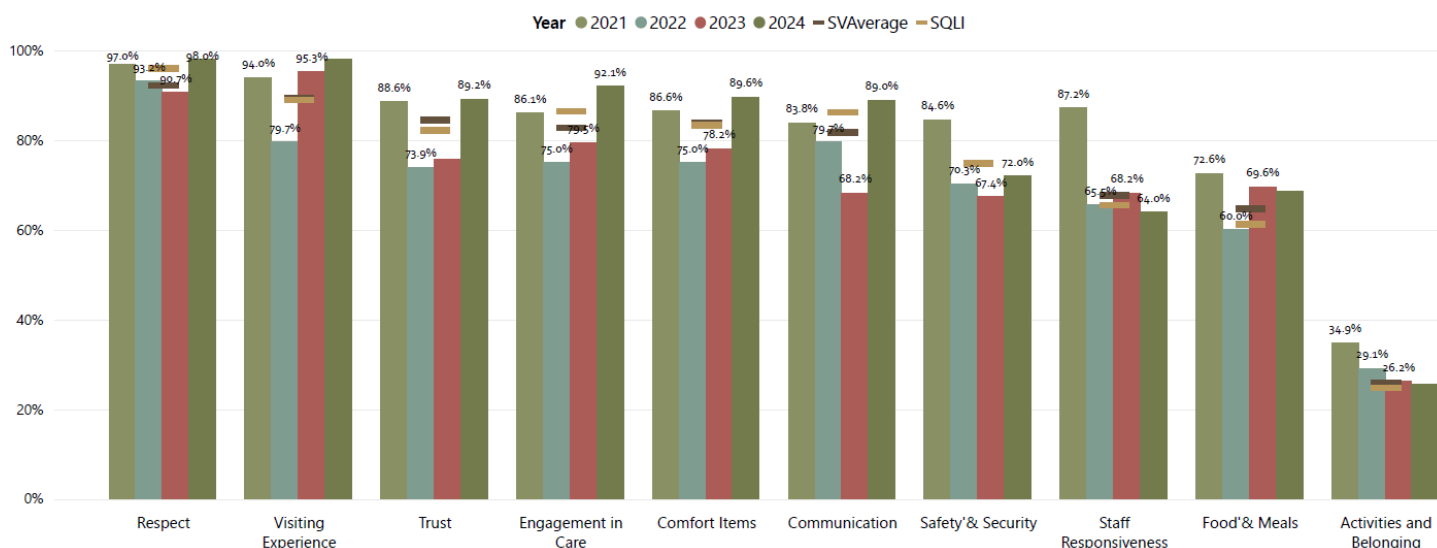
**Social Life Scale (10 items; max score 30):** This scale evaluates residents' social interactions and engagement, looking at aspects like participating in activities, making friends, and experiencing meaningful connections. 62% of residents surveyed felt they had another resident who was their close friend (up from 60%).

**Food Scale (3 items; max score 9):** This scale gauges residents' satisfaction with food, including their favorite meals, meal variety, and enjoyment during mealtimes. Results from the survey identified improvements in all three statements within this scale. 82% of residents surveyed enjoy mealtimes, compared to 78% in 2023.

**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. Friendships were a consistent theme as 71% of residents consider a staff member their friend (up from 65%).

**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, 51 responses were received in 2024. The majority of domains saw positive results and met or exceeded available benchmarks. Improvements were noted in 7 out of 10 domains. Opportunities exist within the staff responsiveness, food and meals, and activities and belonging domains.

Family Survey Domains



#### How the results were shared:

Our 2024 Quality of Life survey results were shared with our CQI Committee on February 10, 2025. The survey was also shared with team members through neighbourhood huddles on January 21, 2025 and February 7, 2025. Quarter 3 survey results were shared at Residents' Council on December 10, 2024 and final survey results were communicated on May 6, 2025 via paper printout. Survey results were shared with families on May 9, 2025, and Family Council on May 6, 2025 via email.

Our 2024 Family survey results were shared with Family Council via email on April 29, 2025, and with Residents' Council via paper printout on April 30, 2025. All families received a digital copy of the survey via email on May 9, 2025. Our CQI Committee reviewed 2024 Family survey results on June 2, 2025. Family survey results were shared with team members through neighbourhood huddles on May 8, 2025.

### *QUALITY IMPROVEMENT IN 2024-2025:*

Improvements were made in reducing the number of potentially avoidable emergency department (ED) visits in 2024. Use of the hospital tracker in our electronic health-record software allowed the Village to identify trends in our ED transfers, and falls was identified as a common cause. Improvements in this initiative may be partially attributed to the overall decrease in falls over the year, as the fourth quarter of 2024 saw the lowest number of falls. Additionally, there was a reduction in the severity of fall-related injuries. Team members received education on the common causes of potentially avoidable ED transfers during a registered team meeting in May 2024, as well during neighbourhood huddles in August 2024 and September 2024. Identified trends were communicated to our physicians and nurse practitioner throughout the year which resulted in increased awareness.

Reducing the percentage of LTC residents not living with psychosis who were given antipsychotic medication was a focus for the previous 2 years. Due to the high percentage of new residents moving into the Village already prescribed antipsychotic medication prior to admission, the Village did not see improvements in our performance data. Our physicians and Personal Expression Resource Team (PERT) reviewed 100% of residents who are receiving antipsychotic medication throughout the year. All residents were evaluated to determine the appropriateness of reducing or discontinuing their antipsychotic medication. As a result, 8% of residents on antipsychotics had their medication discontinued in 2024, and another 8% had their dosage reduced.

"I can express my opinion without fear of consequences" survey statement was chosen as a 2024/25 priority area based on results of the 2023 QoL survey. One notable success was improving participation in Residents' Council compared to the previous year. One neighbourhood saw representation for the first time in more than 12 months. A representative from the Ontario Association of Residents' Councils attended Residents' Council, highlighting the organization's role and the support it offers to residents and councils across the province. Our 2024 QoL survey showed a slight improvement over the previous year.

"Some of the staff know the story of my life" was chosen as a focus area based on results of the 2023 QoL survey. Our organization developed the "My Experience" (ME) form which is offered to all residents upon moving into the Village. This form allows team members to get to know residents better and can assist in creating personalized care plans. Additionally, one neighbourhood launched a weekly "Get to know me" program where team members and residents gathered to share personal stories and facts about each other.

Following recommendations from our CQI Committee, "I have the opportunity to explore new skills and interests" was selected as a focus for 2024. The Village successfully organized two new activities or outings each month throughout the year. By offering more diverse programming, we created additional opportunities for residents to engage in meaningful activities, explore new hobbies, and enhance their overall sense of fulfillment and satisfaction. These new programs were well-received by our residents.

#### Improvements based on results of QoL survey from 2023

Our councils offer residents and families an opportunity to provide feedback on Village operations and promote ongoing communication among residents, families, and the Village. Our 2024/25 CQI Initiative Report was shared with Residents' Council on June 28, 2024, via letter from the Assistant General Manager in response to meeting minutes, and with Family Council on July 5, 2024 via email. This included several initiatives chosen in response to the QoL survey from 2023, as well as improvements made as a response to the QoL survey from 2022.

Our Quality Improvement Committee supported the implementation of our initiatives throughout the previous year. The Committee reviewed our 2023/24 Continuous Quality Improvement initiative report on June 3, 2024. Our 2024/25 Continuous Quality Improvement Initiative report was reviewed by our Quality Improvement Committee on June 2, 2025. Improvements were communicated to residents, families, and team members through our posted materials board on Main Street.

## Other improvements made in 2024

Our 2024 Employee Engagement Survey (EES) saw a participation rate of 85%, which was a 3% increase over 2023, and the highest participation rate within the organization. EES results were shared at our CQI Committee meeting on December 2, 2024, and results and action plan shared with team members during Neighbourhood Team Development (NTD) meetings on February 11, 2025 and February 13, 2025 as a commitment to improving team member experience. Additionally, improvements to the team member experience were made based on feedback from the 2023 EES and NTD meetings. For example, team members across the organization became eligible for a gym membership discount beginning May 22, 2024.

Our Team Experience Coordinator position began in January 2025 which supports recruitment and onboarding of new team members. This new role is responsible for providing a positive and fulfilling experience for new team members from initial contact to welcoming them into the Village and ensures that each step of the process is engaging, supportive, and aligned with our organizational values.

Improvements in staffing levels were made in 2024. Our Village implemented additional personal support worker lines, including two 12-hour lines, and four 8-hour lines. The hours were delegated based on feedback from team members where the lines may be most beneficial. These lines may be adjusted in the future as residents' needs change. This was shared with our team members through our electronic communication platform on June 7, 2024, and at our CQI Committee on August 12, 2024. Residents' Council was notified of this increase in staffing hours on June 14, 2024, through a letter sent in response to meeting minutes.

In 2024, The Village of Riverside Glen launched a pilot program using a new clinical skills education and training tool powered by virtual reality (VR) as part of our commitment to team member development. This tool, called UbiSim, allowed team members to immerse themselves in a realistic virtual environment where they could safely practice and refine their skills, ensuring the well-being of both team members and residents. The trial ran from May to August and aimed to evaluate the feasibility of using UbiSim as a clinical skills education and training tool in both Retirement and Long-Term Care settings. The results of this trial were shared at a registered team member meeting on April 24, 2025, and shared with our leadership team on April 30, 2025.