



CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2024-25

DESIGNATED LEAD: CANDACE IRVINE, DIRECTOR OF QUALITY & INNOVATION

QUALITY IMPROVEMENT PRIORITIES 2024-25:

1. Antipsychotic reduction is a key priority at the Village at St. Clair. Our Nurse Practitioner and Personal Expression Resource Team (PERT) are committed to diligently reducing and discontinuing antipsychotic medications prescribed without a supporting diagnosis.
2. Strengthening our Skin & Wound program through ongoing promotion of best practices. Focus on education, audit and analysis to improve outcomes.
3. Focus on reducing potentially avoidable Emergency Department (ED) Transfers with the support of our full time Nurse Practitioner through education and analysis of ED transfers.
4. Build trust between team and residents while improving resident wellbeing through Connect the Dots customer service education.

PROCESS TO DETERMINE PRIORITY AREAS:

The Village and CQI committee review performance against relevant benchmarking data to determine priority areas for improvement in 2024/2025. The CQI committee also provides feedback when choosing QIP indicators based on CIHI benchmarks.

1. Review of CIHI indicator results, new admission trends that show high rates of antipsychotic prescribing. Under the recommendation of our Continuous Quality Committee, we have determined our antipsychotic reduction program will remain a priority.
2. Improving outcomes for resident skin and wound care through the implementation of weekly audits performed by registered team and follow up with education. Neighbourhood wound champions promote best practices and attend meetings quarterly to identify risk and provide feedback for specialized training.
3. Through funding made available in 2023 we have had the opportunity to hire a full time Nurse Practitioner. Our focus in 2024 is to reduce potentially avoidable ED transfers and provide education to our registered team to build confidence and improve assessment skills.
4. Resident satisfaction is measured through Quality-of-Life-Survey, Family Satisfaction Survey and CIHI metrics related to social engagement and mood. We also seek feedback from Resident Council and Family Council to determine if current strategies are meeting objectives.

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

1. The Personal Expression Resource Team (PERT) collaborates closely with our physicians to monitor this process and ensure optimal outcomes for our residents. Outcomes and potential candidates for reduction are discussed at bi-weekly PERT meetings.
2. We are committed to reducing worsening wounds through daily wound audits, which help identify areas needing additional education. The Skin & Wound Lead supports the team by conducting weekly rounds, providing education and guidance to enhance outcomes. Additionally, quarterly skin and wound meetings are held to share trends, review audit results, and implement improvements.
3. Through the support of our Nurse Practitioner this has allowed us to enhance care coordination within our Village. This proactive approach ensures residents have prompt access to necessary healthcare services, such as mobile x-rays, in the most suitable setting. This optimizes health outcomes and enriches the overall experience for our residents.
4. We aim to increase the percentage of positive responses for the interRAI Quality of Life survey indicator, "I can get help right away if I need it," by conducting Connect the Dots training sessions to communicate our customer service philosophy. Call bell audits are also performed to enhance response times, ensuring residents receive timely assistance when needed.

Progress towards goals outlined in the CQI initiative report are discussed at quarterly CQI Committee meetings.

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.

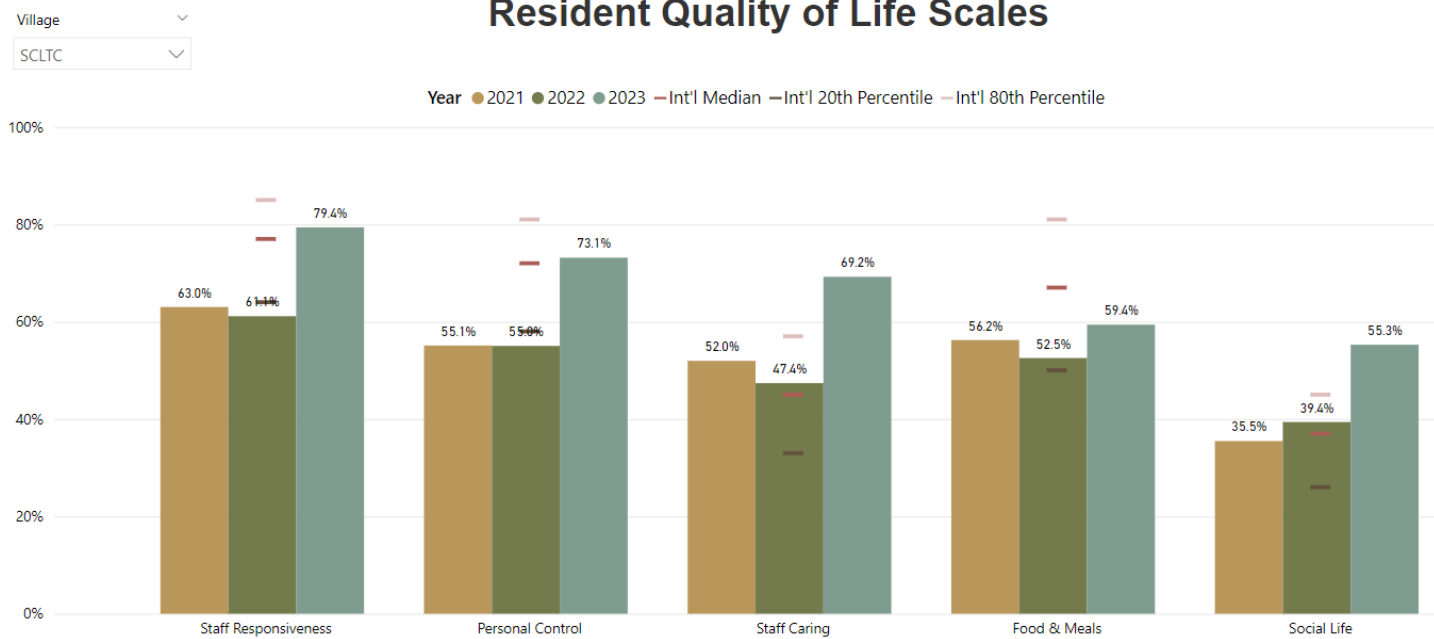
Resident survey: Residents who are able, are given the opportunity to complete the survey annually, around the anniversary of their move-in date. Surveys are run year-round (January to December) to help eliminate bias. New residents moving into the Village are ideally offered a survey twice in their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

Family survey: After meeting with family council, it was recommended that Family Survey be shared via hard copy available at the Village and through email with a link to complete the survey online. The survey campaign began November 13 and ended December 4, 2023.

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 village, we made improvements in all scales in 2023, compared to 2022. We are within the band of performance (international benchmarking) for three of the scales, staff responsiveness, personal control and food and meals. We performed above the 80th percentile in both the caring staff scale and social life scale. We had 88 residents participate in the survey in 2023, compared to 100 in 2022.

Resident Quality of Life Scales



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 3 questions within the scale were “I am treated with respect by the staff” (92%), “The care and support I receive help me live my life the way I want.” (81%) and “I get the health services I need” (80%). An opportunity for improvement is “I get the services I need” (28%); this could be due to the general nature of the statement.

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, we scored above 80% with residents feeling positive about making decisions on how to spend their time and when to go to bed. We had significant improvements with residents feeling they could easily go outside (increased from 50% in 2022 to 77% in 2023), the ability to decide how often they could have a bath or shower (increased from 48% in 2022 to 71% in 2023) and with controlling who comes into their room (increasing from 32% to 60%).

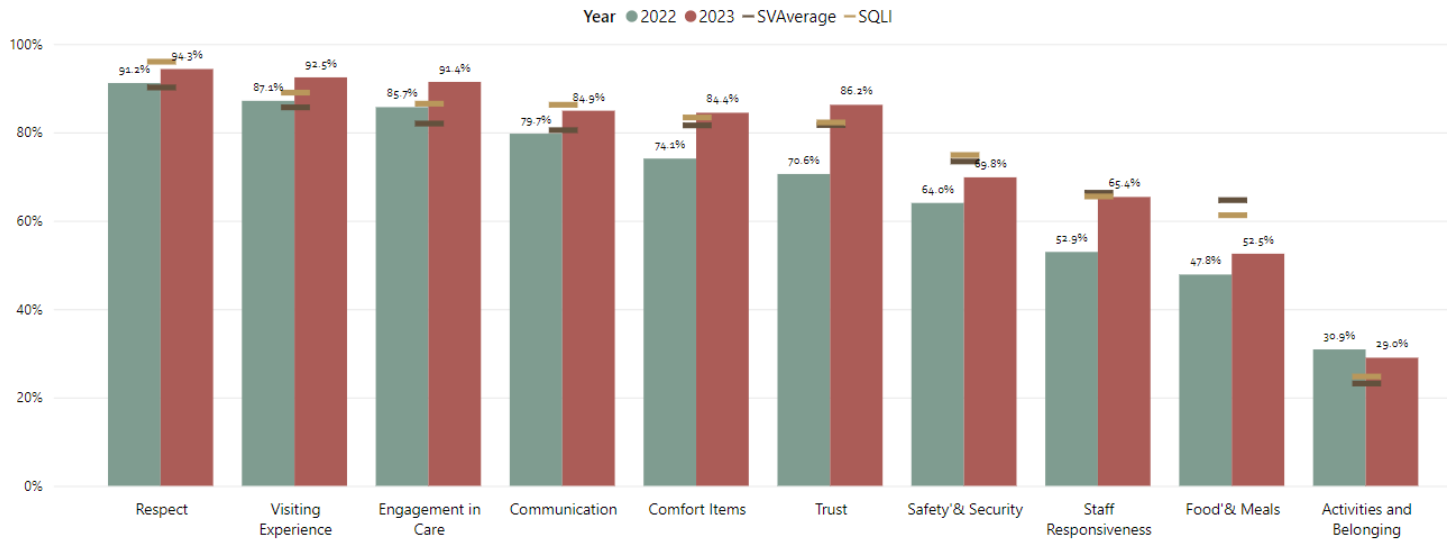
Social Engagement/Life Scale (10 items; max score 30): This scale evaluates residents' social interactions and engagement, looking at aspects like participating in activities, making friends, and experiencing meaningful connections. In 2023, we made significant improvements with the question, “It is easy to make friends here”, increasing performance from 51% to 76% (which is well above organizational and international averages). We also scored above average for “I have the opportunity to explore new skills and interests” (40%), “Another resident here is my close friend” (50%), and “I have people to do things together with me” (46%).

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, we increased performance with “I enjoy mealtimes” from 61% in 2022 to 66% in 2023. We have an opportunity to improve “I get my favourite foods here” as we dropped from 35% in 2022 to 28% in 2023 and are below 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 made improvements in all 5 questions related to caring staff in 2023. The highest rated question was “I consider a staff member my friend” (72%).

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 61 responses in 2023, up from 35 in 2022. We perform well in the majority of domains and are at or above available benchmarks in 8 domains. Opportunities exist within food and meals as well as activities and belonging domains.

Family Survey Domains



Results of the family survey and resident quality of life survey have been shared at council meetings March 5, 2023 and March 6, 2023. All survey results available on main street in the village for residents, families and team members to access.

QUALITY IMPROVEMENT IN 2023-2024:

Quality Improvements made in 2023:

- 1) Based on the results of the 2023 Quality of Life (QoL) survey, the Director of Quality & Innovation met with the Family Council on June 27, 2023, to review the family engagement survey outcomes. In early 2023, the Resident Council collaborated with the Director of Quality to select the interRAI Quality of Life indicator for the Village at St Clair's Quality Improvement Plan (QIP) for 2022-2023. The chosen indicator was "Staff have enough time for me." Notably, we achieved a significant improvement, increasing positive responses from 32% to 58%, thereby meeting our QIP goal. Over the last year the village has also increased the amount of PSW support on afternoons from 4 to 5 PSWs.
- 2) On March 5, 2024, the Director of Quality & Innovation and the General Manager met with the Family Council to discuss the results of the family engagement survey conducted from November 13 to December 4, 2023. An action plan was reviewed, and feedback was sought on priority areas. The Family Council highlighted laundry labeling as a concern, leading to the development and implementation of an action plan. The plan was implemented through neighbourhood huddles from April 23 to April 29, 2024.
- 3) Improvements were made in the Quality of Life "the staff have enough time for me" domain. The village teams from all disciplines were able to increase the positive responses in this domain by engaging residents for 15 minutes of 1:1 activity to be completed outside of the team members regular role.
- 4) In response to feedback received on the resident and family surveys the dietary team introduced menu tasting events. These events were held October of 2023 and again on May 2, 2024 and were very successful in providing an opportunity for the families, team and residents to sample food and choose menu items for the next cycle.

The Village at St Clair also participated in a SQLI focus group for both the Resident Council on April 11, 2024 (QoL Surveys) and the Family Council on March 5, 2024 (Family Engagement Survey), allowing both groups to provide feedback on the survey questions. This information was shared with Amanda Nova, a PhD researcher at the University of Waterloo in Canada and KU Leuven in Belgium.

Both survey results were communicated to the village teams through neighbourhood huddles on June 27 and June 28, 2024. Additionally, all survey results are posted and available to residents, families, team members, and visitors on Main Street.