

# CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2024-25

DESIGNATED LEAD: Samantha McKoy, Director of Quality and Innovation

# QUALITY IMPROVEMENT PRIORITIES 2024-25:

- 1. Reduction of falls: Managing falls in our home is a continuous top priority, a part of that plan includes routine audits of care plan falls interventions and in turn, ensuring that our team members are well versed in the care plan fall interventions of all residents and understand the organizational policy related to falls. Through the monitoring of residents that are at higher risks for falls, we found value in incorporating the use of meaningful and active engagement with residents at the observed high risk time frames.
- 2. Reducing emergency department transfers: As a village, we continue to work towards the reduction of avoidable emergency department transfers. We aim to accomplish this with the support of our Nurse Practitioner that has recently joined our village though available funding. The Nurse Practitioner role within the clinical team builds further capacity through increased involvement prior to emergency department transfers, palliative conversations with residents and families when a resident's palliative performance score declines and input into interdisciplinary monthly reviews of transfers. In addition, collaboration with external community partners continues to be an educational asset to our team members.
- **3. Reduction of worsened wounds:** Our village's approach to reducing wounds among our residents prioritizes ensuring that our nurses are educated on wound treatment through all stages while identifying wound champions. Through regular wound rounds by the clinical management team collectively with monthly trend reviews of deteriorating wounds and observation the contributing factors in deteriorating wounds strengthens our approach on preventing wounds from worsening but also allow us to better understand the preventative measures needed for our residents.
- 4. Quality of life focus: The participation of our residents in the QoL (Quality of Life) surveys and Residents' Council provides the opportunity for residents to share what they would like the village to work on improving and our residents expressed that they would like a deeper look into QoL survey question, "If I need help right away, I can get it". We want to first gather information from residents to get a better idea of the barriers that they encounter when getting the help that they need when they want it and collecting their suggestions to removing such barriers. To further support better understanding of the statement, we will be utilizing response timeliness through data collected from call bell reports and increasing team member awareness and involvement related to the improvement of the QoL question. Providing training and education continues to be an effective tool for team members, enhancing the team member learning experience.
- 5. Meal enjoyment: As the quality of life of residents is always at the center of what we do, we wanted to lean on the voices of our residents to bring focus to the variety of meals that we offer while incorporating their favorite meal options. To better understand resident's point of view, in addition to monthly food committee meetings, the village will hold focus groups that will facilitate more in-depth conversations related to meal variety preferences. Offering a variety of meals to our residents is very integral to an enjoyable dining experience, from aspects of nutrition, social and choice. We take pride in the diversity of the cultures and ethnicities of our residents and our goal is for our meal options to reflect that as well. With that in my mind, we plan to review the food scale through the individual questions, to provide a full scope of the contributing factors affecting food and meals for residents.

# PROCESS TO DETERMINE PRIORITY AREAS:

- 1. Reduction of falls: Through the avoidable emergency department visits data from Local Health Integration Networks (LHIN), it has indicated that one of the highest reasons for transfers is due to injuries from the result of a fall. The data from the LHIN in combination with our internal falls database that is reviewed interdisciplinary on a monthly basis, provides the village with an overview of fall trends and residents at risk for falls. Throughout 2023, our falls varied at approximately 38 falls in Q1, 47 falls in Q2, 55 falls in Q3 and 49 falls in Q4. We saw this is an opportunity to increase our focus to reducing falls and the risk of injury from falls, which led to aiming for the goal of trending downwards in our monthly falls, analyzing the contributing factors causing increased falls and ensuring that effective interventions are in place for residents.
- 2. Reducing emergency department transfers: The village continues to utilize the avoidable emergency department visits data that we receive from the Local Health Integration Networks (LHIN), providing us with the insight that need to better understand the reasons for hospital transfers. Our highest reasons being injuries from the result of a fall and pneumonia infections. With the recent addition of the Nurse Practitioner role in the village, it brings valued comprehensive perspective and approach to the clinical care related to our change ideas that will contribute to the reduction of avoidable emergency department transfers.
- 3. Reduction of worsened wounds: As a village, we decided to shift our focus to preventing worsened wounds. We found that there has been an increase related to residents moving into the village, returning from the hospital and residents in-village with wounds. As a village, we are taking a proactive approach for wounds, understanding the contributing factors and how we can manage wounds from worsening through prevention, monitoring and healing.
- 4. Quality of Life Focus: The results of the 2023 Quality of Life (QoL) survey results were shared with residents, families, team members and the CQI committee. Our next step was to take it to the Residents' Council to further review survey outcomes for their feedback on the scale and or question that they wish for the village to focus on and the council provided their suggestion that there is room for improvement when it comes to "getting help right away, when needed".
- 5. Meal enjoyment: Residents apart of the resident council and outside of the council have expressed their wishes for increased meal variety. In addition, as the CQI committee monitors the Quality of Life (QoL) surveys on a quarterly basis, specifically under the food and meals scale, the opportunity has been observed where we could improve and increase positive responses under the "I get my favorite foods here" and "Variety of Meals" items which we hope, will result in, increased mealtime enjoyment overall.

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

- 1. Reduction of falls: To further support our proactive approach to reducing falls, we will be ensuring that all team members are aware of the organizational falls policy and their role in the falls management program. Together with regular huddles of high-risk residents, it will ensure that team members are aware of the care plan fall interventions and that current interventions are effective, along with monthly audits of care plans. Completed meaningful and active engagement sessions with high-risk residents could serve as an effective tool to reduce falls with residents during those identified high-risk time frames by not only engaging them in meaningful moments but can also be a moment of observation of the residents to better understand the reasons that are causing the resident to experience a fall. Progress is shared monthly during high-risk meetings and quarterly with the CQI committee to discuss concerns and interventions.
- 2. Reducing emergency department transfers: On a regular basis, as a village, we review and analyze all emergency department transfers to indicate potential avoidable transfers, this data helps us implement effective interventions to be put in place for gaps found, such as educational opportunities. Collectively through regular reviews of emergency department transfers and increasing the involvement of the Nurse Practitioner, we can proactively provide the registered team with education related to assessments of residents prior to transfers. The Nurse Practitioner will also initiate conversations with residents and families when a resident's palliative performance score declines. In tracking residents with a declining palliative performance score and discussions, those important and early conversations can

potentially reduce unnecessary transfers that could negatively impact a resident's physical, emotional and mental wellbeing taking away from the village's goal of providing comfortable care to residents. On a quarterly basis, we review the progress of the priority at quarterly CQI committee meetings for additional feedback and suggestions.

- 3. Reduction of worsened wounds: To effectively prevent and manage wounds, the registered team will be provided with wound treatment education sessions and wound champions will be designated on each neighborhood. In addition, we will track new and existing wounds through referrals that are sent and reviewed by the Skin and Wound lead to monitor progress, paired with the implementation of weekly rounds by the Skin and Wound lead, Director of Care and Nurse Practitioner to ensure that treatments are effective and being provided promptly by the registered team. Completed and analyzed observational audits such as transferring and repositioning will be conducted on a weekly basis and shared with the neighborhood team. Progress and gaps will be reviewed with neighborhood teams monthly brought forward to monthly high-risk meetings and quarterly and CQI committee meetings.
- 4. Quality of Life Focus: As a village, we aim to increase residents responding positively to the Quality of Life (QoL) question "If I need help right away, I can get it" by utilizing the use of an in-house survey and providing the opportunity to all eligible residents to provide clarification and share identified gaps related to barriers they experience. Further insight can also be gathered from reviewing monthly call bell reports and duration of time it takes for calls to be acknowledged. Reports that indicate calls exceeding 5 minutes before being acknowledged will be analyzed and reviewed with the neighborhood team for determine causes and improvement opportunities. We will provide awareness to neighborhood teams on the current performance, share the barriers and suggestions that residents provide from in-house surveys, focus group sessions and seek input of their perspective of the indicator. There will be regular communication with the members of the resident council through meetings and one on one discussions on the progress related to the indicator.
- 5. Meal enjoyment: On a quarterly basis, we will review and track the trends of the Quality of Life (QoL) survey results, the Director of Food Services will also utilize the monthly food committee meetings to first understand more in depth what makes an enjoyable meal to residents. From there we can dive further into meal favorites and what variety is to residents while also taking into account their nutritional needs and diets. Utilizing the items under the Food and Meals scale can help to serve as a guide to making improvements in this area.

## 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 1<sup>st</sup> to December 31<sup>st</sup>) 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:

To provide opportunities to all families to give feedback, family members are provided with the survey through email and during annual care conferences. The survey was open from January 1<sup>st</sup> to December 31<sup>st</sup>. Families can complete through paper format or electronically. The village reviewed the results to analyze and compare the areas that we had received our highest scores and our areas of improvement. From there, we created an action plan of the areas that we will focus on improving in and initiatives that we will put in place to help us achieve those goals. The action plan will be shared with the family council in July 2024 to explore any further feedback, if any.

#### 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. In 2023, we had 39 residents participate in the survey process compared to 21 in 2022. As a village, we made improvements on all 5 scales in the past year. We are within the international benchmarks for all 5 scales. Both Caring Staff and Social Life scales are near the 80<sup>th</sup> percentile.



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 improved on the majority of questions within this scale, meeting or exceeding available benchmarks on 6; staff treating with respect (95%), respecting likes and dislikes (77%), staff paying attention to them (85%), staff responding quickly when ask for assistance (77%) and the care and support received help resident live life the way they want (74%). An opportunity for continued improvement is related to the question, "if I need help right away I can get it" (64%, compared to organizational average of 67%).

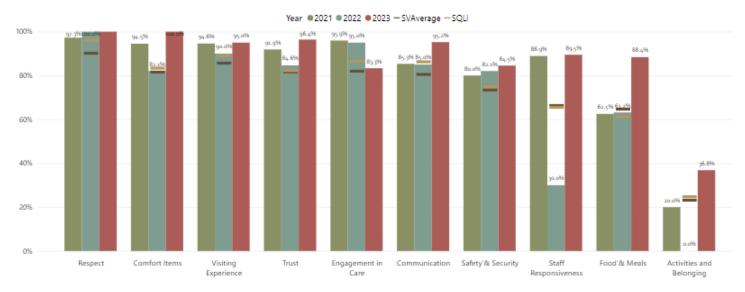
Personal Control Scale (8 items; max score 24): This scale measures how much control residents have over their daily activities, including going outdoors, choosing activities, and deciding on personal matters. We had significant improvements on a number of questions related to personal control. These include residents feeling they can control who comes into their room (increased from 24% to 79%), deciding how to spend their time (increased from 62% to 90%), and the ability to be alone when they wish (38% to 82%). There is opportunity for continued improvement with residents deciding when to go to bed; we increased from 48% to 67%, and are below organizational average of 77%.

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. We improved on the percentage of positive responses on nine of ten questions within this scale. We have surpassed organizational and international averages for enjoyable things to do on weekends (49%), opportunities to explore new skills and interests (49%), having people to do things together with me (41%) and people ask for my help and advice (31%). There are opportunities for continued improvements with "it is easy to make friends here" (improved from 19% to 41% and slightly below organizational average of 49%). Religious activities that have meaning to me improved from 5% to 44% and is just under organizational average of 56%.

Food Scale (3 items; max score 9): This scale gauges residents' satisfaction with food, including their favorite meals, meal variety, and enjoyment during mealtimes. We were able to meet organizational average for enjoyable mealtimes in 2023, increasing from 48% in 2022 to 72%. The percentage of residents feeling positively about getting their favorite foods here increased from 29% in 2022 to 51% in 2023. Variety in meals also improved and is just under the organizational average (62%).

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 questions related to this scale. We have surpassed organizational and international averages (45% and 50% respectively) with staff ask how my needs can be met – improving from 29% to 79%,

*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 22 responses in 2023, compared to 10 in 2022 and 38 in 2021. In 2023, we perform well in the majority of domains and are at or above available benchmarks.



#### Family Survey Domains

#### How the results were shared:

The results of the family survey results were shared with team members through huddles in February of 2024. The Residents' and Family Councils are provided with the results of the survey during their March and February meetings respectively. The results are also included in our Minutes binder on Main Street for residents and families to access.

### QUALITY IMPROVEMENT IN 2023-2024:

#### For last year's CQI report, we implemented the following, through our set initiatives:

#### Reducing emergency department transfers:

- We implemented the use of the PREVIEW-ED tool through collaboration with Ontario Central over the course of 2023. Education began in January, and after corrections to the technology, it was fully implemented in October.
- In August, we implemented the use of the bladder scanner to aid with the assessment of residents who may urinary dysfunction/retention.

#### **Reducing wounds:**

• Through ongoing education and collaboration with external partners, there has been a steady decrease in bruises, wounds and skin tears. Worsened wounds decreased from 6.8% in the first quarter of 2023 to 4.6% by end of year.

#### Improving resident engagement:

• We implemented Dedicated Care and Meaningful and Engaged Activity in the last quarter of 2023 to help support quality of life of our residents.

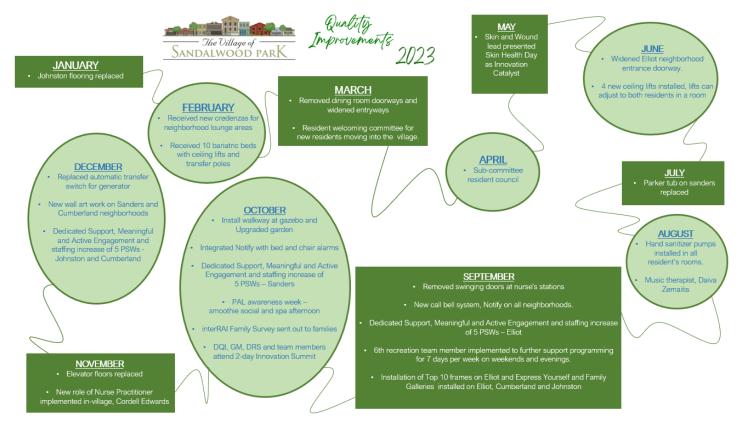
#### Enhancing customer experience:

• We trained 140 team members in our Connect the Dots customer service program throughout 2023.

# Based on the results of the QoL survey and through suggestions provided to us from the Family Council, we made the following improvements:

- March: Removed dining room doorways and widened dining room doorways to accommodate wide wheelchairs on all neighborhoods
- March: Sub-committee resident council for residents that are not able to attend main monthly Residents' Council meeting
- June: Widened neighbourhood entrance doorway on Elliot neighborhood
- September: Removed swinging doors at nurse's stations
- December: Started surveying residents with in-house survey to follow up on the resident council's decision for the village to focus on the QIP indicator "I can go where I want on the spur of the moment" what does this mean to the residents, how do we change this for them?

To capture improvements made in 2023, we created and shared the following document:



Summarized quality improvement document shared with the CQI committee on April 10, 2024, huddled with team members throughout the month of April 2024 and with residents, families and visitors through the March 2024 village newsletter.