



CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2025-26

DESIGNATED LEAD: Tricia Bakelaar, Director of Quality and Innovation

QUALITY IMPROVEMENT PRIORITIES 2025-26:

- Improve the quality of life of residents by increasing through focus on 'staff respond to my suggestions' as identified on our Quality Improvement Plan (QIP).
- Reduce the percentage of residents who develop pressure injuries or experience a worsened pressure injury (QIP)
- Reduce the percentage of residents without psychosis who were given antipsychotic medications in the 7 days preceding their resident assessment (QIP)
- Enhance communication between the village and family members to support increased collaboration, transparency, accountability and follow through

PROCESS TO DETERMINE PRIORITY AREAS:

- The Village's Quality Improvement Plan priorities were chosen by reviewing CIHI data and resident quality of life survey results, and using recommendations from Residents' Council (March 13, 2025), Family Council (March 18, 2025), and Continuous Quality Improvement Committee (CQI) (January 16, 2025, February 20, 2025, March 20, 2025).
- When reviewing progress towards our QIP from 2024-2025, we identified an opportunity to continue our work on both pressure injuries and antipsychotic use, as we had not yet achieved our targets. Both of these areas are in line with organizational and provincial priorities. The CQI Committee, along with Residents' and Family Councils were involved in the discussion and agreed to prioritizing these key areas. For our resident quality of life focus, the survey results were reviewed and presented to Councils, along with the CQI Committee. As we had not yet reached our target, and residents continued to desire increased communication of responses to suggestions, we chose to work on this area for another year.
- The priority area related to enhanced communication between the village and family members is related to results from the 2024 Family Survey. CQI Committee on February 20 recommended that Family and Residents' Councils be given final say in requesting focus area, and Family Council on February 22 recommended that communication be an area of focus, because of the impact that communication has on so many other indicators. Family and committee members felt that an improvement in communication would likely also improve results on other family survey questions.

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

- We will improve resident satisfaction of village responses to complaints by implementing a one-month check-in post resident initiated complaints to ensure response is satisfactory. We will ensure a monthly discussion of complaint trends with the Village leadership team. We will provide a list of improvements and responses to Residents' Council, and we will conduct neighbourhood town halls to share improvements with residents who don't attend Residents' Council.
- We will conduct root cause analysis of stage 1 pressure injuries, review monthly wound trends with neighbourhood nurses, and conduct audits of toileting and repositioning requirements and documentation.

- New residents moving in and who are also taking antipsychotic medications will be reviewed by our pharmacist at their 3 month and 6 month medication review for appropriate usage, a letter will be sent to family of new residents taking anti-psychotic medications to provide notification of review, and weekly case study with team to support early identification of escalating situations.
- To support enhancing communication with family members, we will ensure registered team are re-educated on expectations regarding retrieving and returning phone messages, discuss the differences between consulting vs notifying, coach team members on how to respond to frequently asked family questions, improve communication between all three shifts, and streamline email communications to family members.

Progress as well as outcomes will be communicated via Resident and Family Councils, Village Newsletter, and Crossroads to Team Members every other month in 2025.

RESIDENT & FAMILY/CAREGIVER EXPERIENCE SURVEYS:

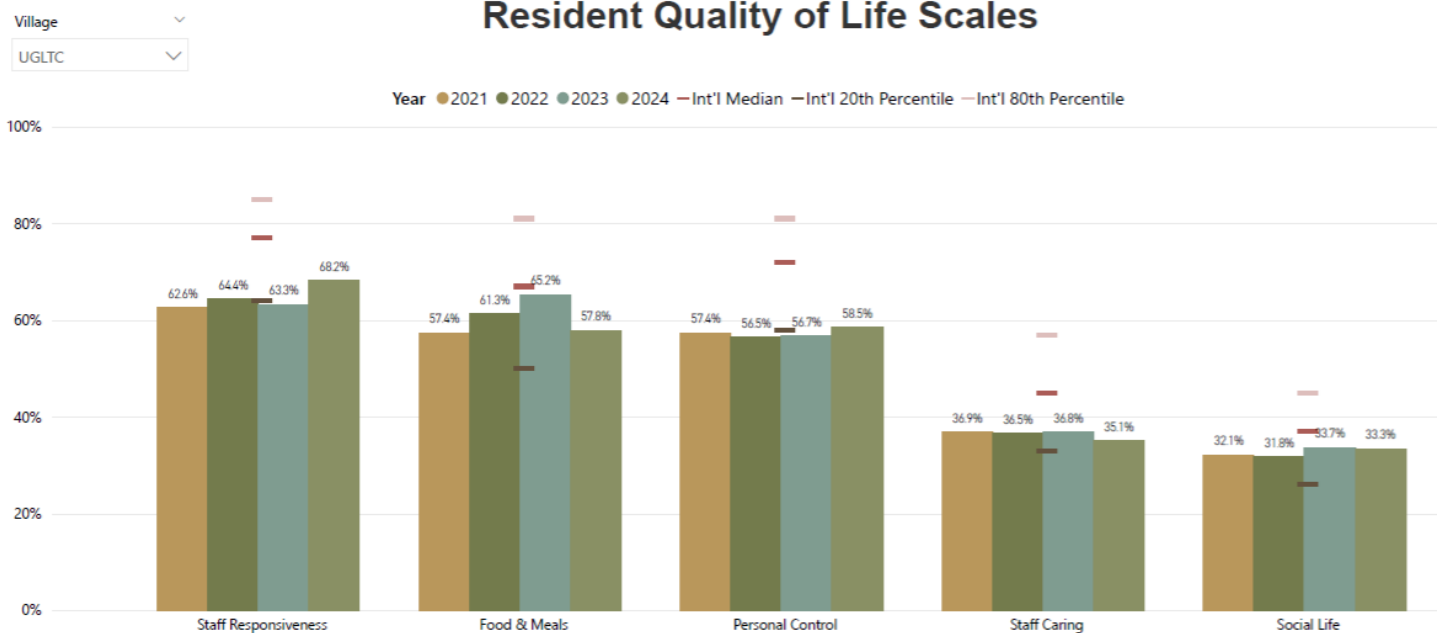
Schlegel Villages measures resident and family/ caregiver experience using the interRAI Self-Reported Quality of Life Survey and the interRAI Family Survey on Quality of Life. The survey is made up of a number of statements, and participants are asked to respond with how frequently the statement is true 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: Family Surveys were sent as an attachment to substitute decision makers who have provided their emails, as well as a QR code and a hyperlink within that email on November 5, 2024. Hard copies of the surveys were also mailed to the Financial Contacts, as well as placed at the front desk in Long-Term Care for families to pickup and complete if they were interested. The survey was open until November 15, 2024, and the Village received 40 completed surveys in return.

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 University Gates report is included below, along with a brief overview. International benchmarks are from 2018. As village, we are within the international band of performance in all five scales, which marks an improvement over last year's results. As a village, we had 97 residents participate in the survey in 2024.



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 made improvements on six questions in this scale, notably an almost 15% increase in residents feeling they get the health services they need (53% in 2023 and 69% in 2024), and a 10% increase in residents feeling that team members pay attention to them (65% to 76%). Additionally, 86% of residents surveyed feel they are treated with respect by the team (up from 78%).

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. Performance increased in all areas of this scale in 2024. Of highlight, 86% of residents surveyed felt they could decide how to spend their time (up from 74%). 81% of residents felt they could be alone when they wished (up from 67%), and 76% felt they had more control over when they go to bed (up from 55%).

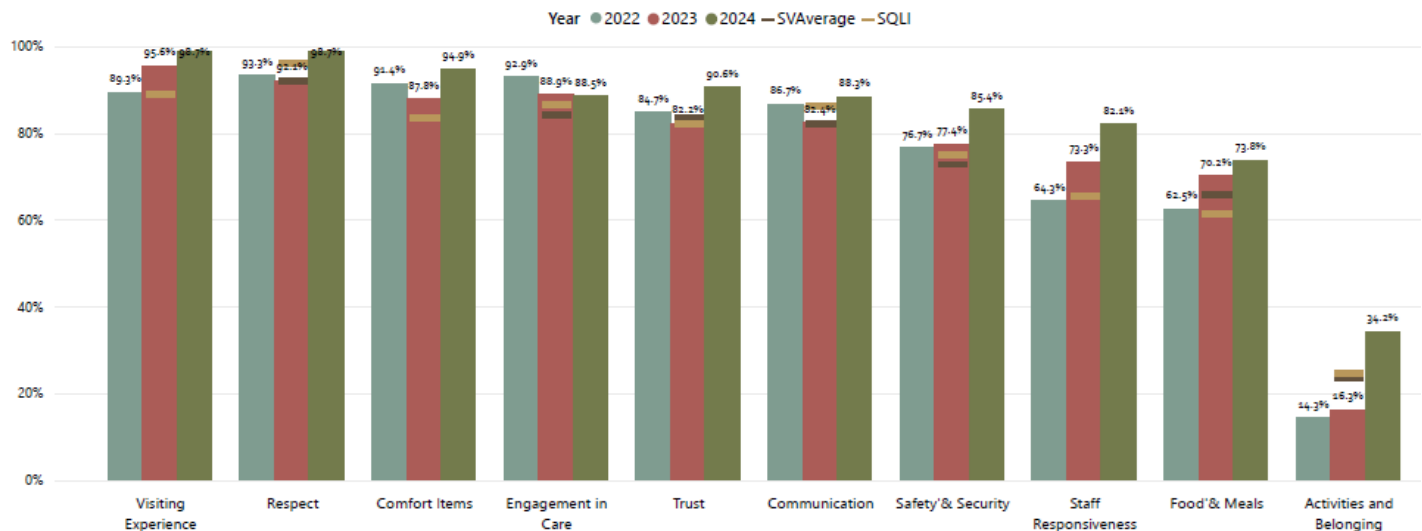
Social Life Scale (10 items; max score 30): This scale evaluates residents' social interactions and engagement, looking at aspects like participating in activities, making friends, and experiencing meaningful connections. In 2024, residents scored the Village higher on 8 questions within this domain. Most notably, a 14% increase for the question 'I have opportunities to spend time with other like-minded residents' (22% in 2023 and 36% in 2024) and an 11% increase in the question 'religious activities that have meaning to me' (40% in 2023 and 51% in 2024). 51% of residents also felt that it is easy to make friends here (up from 45%).

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 have opportunities to make improvements within this scale as residents identified positive responses less frequently with all three questions.

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 improved on three questions within this scale and continue to have opportunities to improve. We did see improvements in Team Members asking how resident needs can be met (12% in 2023 to 23% in 2024), and team members taking the time to have a friendly conversation with residents (29% in 2023 and 35% in 2024). We have remained relatively stable with 41% of residents responding positively to "I consider a staff member my friend".

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 village, we received 40 responses in 2024. We improved in all but one domain and are above all available benchmarks in all domains in 2024.

Family Survey Domains



How the results were shared with residents, their families, Residents' & Family Councils and team members:

Resident Survey results were shared with Residents' Council on January 23, 2025 and February 20, 2025, with Family Council on January 23, 2025, emailed to families on February 1, 2025, posted on Main Street on February 1, 2025 and with Team Members via Crossroads on May 15, 2025.

Family Survey results were shared with Residents' Council on February 20, 2025, with Family Council on February 22, 2025, emailed to families on February 25, 2025, posted on Main Street on February 1, 2025 and with Team Members via Crossroads on May 15, 2025.

QUALITY IMPROVEMENT IN 2024-2025:

Improvements based on results of QoL survey from 2023

- Resident QOL Survey question 'Staff Respond to My Suggestions' improved from 15.5% in 2023 to 19.6% in 2024 as a result of 2024-2025 QIP goals approved by CQI Committee, and Residents' and Family Council (suggestions being discussed at team member meetings, monthly town hall program, suggestion box installation). Success communicated to Residents' Council on January 23, 2025, Family Council on January 23, 2025, CQI Committee on January 16, 2025, and Team Members on June 25, 2025.
- Family Survey question 'I know who to contact if I have concerns about my family member's care' increased from 80% in 2023 to 89.5% in 2024 as a result of providing a condensed version of the Village's phone extension list to new families via the new resident paperwork, and existing families via email. Communicated to CQI on June 19, 2025, Family Council on June 21, 2025, Residents Council on June 26, 2025 and Team Members on June 25, 2025.
- 82 Team Members attended Connect the Dots customer service training from June 9, 2024 to April 29, 2025 as part of the commitment to increase family members' satisfaction with customer service. Communicated to CQI

Committee on June 19, 2025, Family Council on June 21, 2025, Residents' Council on June 26, 2025 and Team Members on June 25, 2025.

- Village Orientation held on March 18, 2025, December 13, 2024, November 11, 2024, October 17, 2024 as part of the commitment to ensure new team members are trained on how to receive and respond to complaints, as a way to increase trust, respect, and staff responsiveness domains of the Family Quality of Life Survey. Shared with CQI Committee on June 19, 2025, Family Council on June 21, 2025, Residents' Council on June 26, 2025 and Team Members on June 25, 2025.
- Resident QOL Survey Question 'Staff have enough time for me' increased from approx. 43% in 2023 to 69% in 2024, impacted by an increase in minimum staffing levels. Shared with CQI Committee on June 19, 2025, Family Council on June 21, 2025, Residents' Council on June 26, 2025 and Team Members on June 25, 2025.

Other improvements made in 2024

- 75% improvement on Medication Cart audit from 2023 to 2024 in June 2024 as a result in team stability and individual coaching from clinical leadership.
- Back to Basics held July 18, 2024, September 5, 2024, March 27, 2025 to provide education to team, family, and residents in an interactive format to promote retention and engagement
- Implemented 4 hour Mandatory Registered Team Meetings approximately every other month to enhance the clinical skills and capacity in registered team members (May 30, 2024, July 11, 2024, October 3, 2024, March 25, 2025, April 22, 2025).
- Partnership with Geropsychiatrist Dr. Benjamin and her team who tested a medication optimization protocol resulted in discontinuing antipsychotic medications for 17 residents in 2024.
- Pharmacy scanning technology implemented to support order transcription, reported to CQI Committee on October 17, 2024.
- Weekly Critical Incident Review process implemented January 2024, recommitted to in October 2024, reported to CQI Committee on October 17, 2024.
- Ensured each resident needing to use a lift, had own sling by March 31, 2024
- Fewer complaints related to parking were received in 2024, partially enabled by quarterly reminders to Team Members about parking expectations (January 15, March 20, July 10, October 27).
- Resident self-serve condiment caddies reintroduced to table settings on March 9 and 10, 2024 to increase resident autonomy and increase enjoyment of meals
- 73 Team Members in LTC were provided with education related to changes that may occur with dementia, relationship-centred care, partnership approaches, protective expressions, and the stoplight approach

All of these improvements were shared with CQI Committee on June 19, 2025, Family Council on June 21, 2025, Residents' Council on June 26, 2025 and Team Members on June 25, 2025.