



## CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2024-25

*DESIGNATED LEAD:* Sarah Roberts, Director of Quality and Innovation

### *QUALITY IMPROVEMENT PRIORITIES 2024-25:*

We have identified the following priorities, which align with our 2024-2025 Quality Improvement Plan.

1. Improving the resident experience by focusing on the resident quality of life survey question, "I can be alone when I wish."
2. Reducing worsened pressure injuries.
3. Reducing the use of antipsychotics for residents without a diagnosis of psychosis.

### *PROCESS TO DETERMINE PRIORITY AREAS:*

Our continuous quality improvement (CQI) committee reviewed our CIHI indicators compared to the Ontario average, and our CQI audit findings. We reviewed our Quality of Life (QOL) survey scores, and compared them to performance in previous years, the Schlegel Villages average and international benchmarks. We reviewed trends related to incidents and complaints to identify areas to work on for improvement. We met with the Residents' Council to review quality indicators, areas of risk, and areas identified for improvement. In Residents' Council, we requested feedback from residents related to what they would like us to focus on. Members of the CQI committee reviewed areas identified for improvement and resident feedback, made recommendations for quality improvement and finalized priority areas.

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

Our Village leadership team meets at minimum monthly, and our Continuous Quality Improvement committee meets quarterly to review our progress towards our Quality Improvement Plan (QIP). We use our process measures, listed below, to monitor our progress towards our target for each indicator.

- The percentage of team members who have completed training about resident privacy and the Resident's Bill of Rights will be tracked with sign-in sheets. As a leadership team, we will review how many team members we have successfully captured as we work towards our goal. Resident spaces will also be checked by the leadership team on a weekly basis, to ensure there are spaces in the Village that are clean, inviting, and available for residents to spend time alone if they wish. The indicator "I can be alone when I wish" will be discussed with Resident Council multiple times to request feedback and track progress. This discussion will be captured in the Resident Council meeting minutes. Feedback and outcomes related to this indicator will be discussed quarterly during Continuous Quality Improvement (CQI) committee.
- The percentage of education completion related to skin and wound will be tracked using sign-in sheets. Skin and wound committee has been scheduled quarterly for the rest of the year and the number of skin and wound committee meetings will be captured with meeting minutes and attendance. The percentage of timely completion of repositioning tasks will be reviewed weekly, as this relates to skin and wound outcomes. Wound trends and progress will continue to be discussed at quarterly CQI committee meetings.

- Review of residents with an order for antipsychotic medication will be documented and monitored. Team member education sessions related to the antipsychotics deprescribing initiative and personal expressions documentation will be recorded with meeting minutes and attendance. As a leadership team, we will review how many team members we have successfully captured as we work towards our goal. Progress towards review of residents taking antipsychotics will be documented and communicated during quarterly Professional Advisory (PAC) and CQI committee meetings.

The trends for each program (e.g., skin and wound) are reported and analyzed monthly to monitor progress and identify areas to focus education and improvement efforts. We use our CIHI numbers and trend reports to monitor our performance in each focus area. Our Director of Quality and Innovation meets with each department leader on a monthly basis to evaluate our progress towards our CQI workplans. We communicate quality improvement outcomes with our team members in team huddles, leadership team in our joint leadership meetings, and with our residents in residents' council. We have also posted our Quality Improvement Plan on Main Street for residents, team members, and family members to access.

#### *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:*

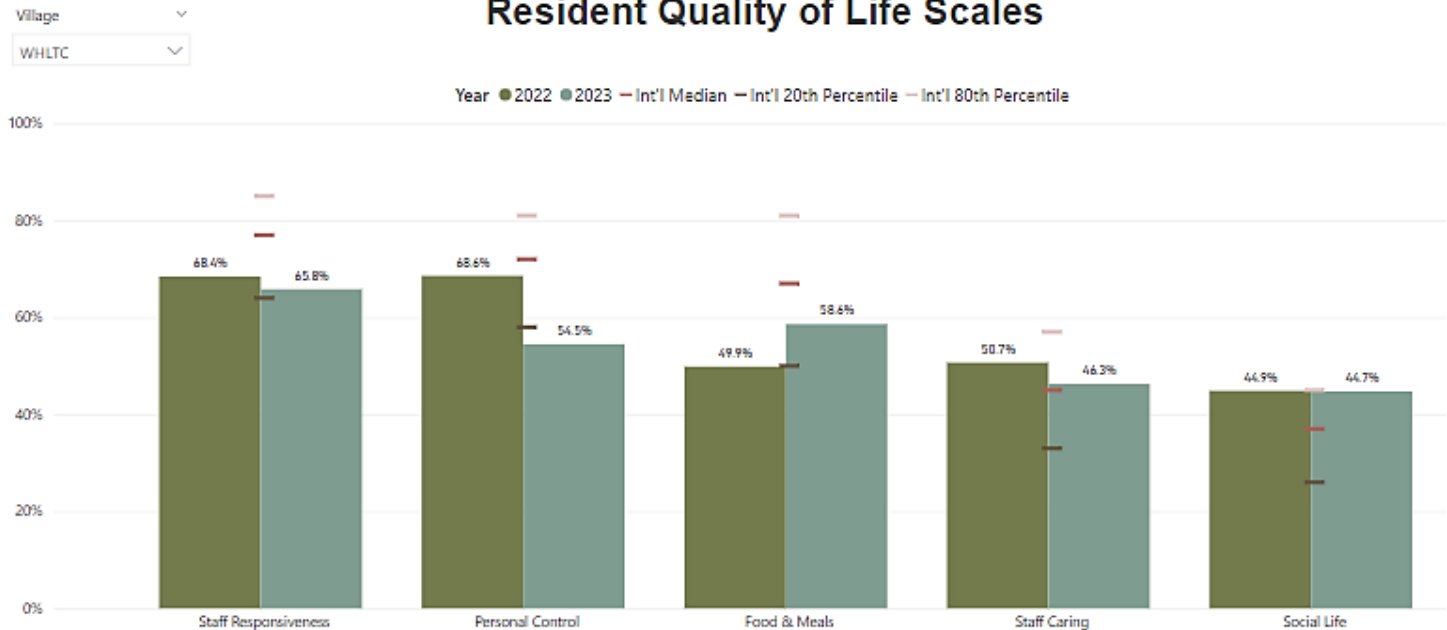
Family members are given the opportunity to complete the survey annually. The family member QOL survey poster and hard copies of the survey were provided at the Village Office on November 13<sup>th</sup>, 2023. The Administrative Assistant mentioned the survey to families when they are visiting the Village Office. The survey was then distributed electronically in a memo to all family members on November 15<sup>th</sup>, 2023 and again on December 5<sup>th</sup>, 2023. The survey closed December 31<sup>st</sup>, 2023. Family members were offered the option to complete the survey in one of three ways;

- Complete on paper at the Village Office and submit to the Village Administrative Assistant
- Complete electronically through the website
- Complete electronically by scanning a QR code using a smart phone or tablet

#### *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. We had 75 residents who participated in the survey in 2023, more than double the previous year (31). Four of the scales performed within the international benchmarks. Social life is near the 80<sup>th</sup> percentile, Caring Staff is at international median. Personal Control has fallen just below the 20<sup>th</sup> percentile.

## 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. The highest rated question within this scale is related to treatment with respect (scoring 81%). There is an opportunity to improve how quickly the team responds when residents ask for assistance (dropped from 84% in 2022 to 65%).

**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. 77% of residents responded positively to deciding how to spend their time, compared to 65% in 2022. There is an opportunity to support privacy as positivity dropped from 71% to 48% for “I can be alone when I wish” as well as daily decisions related to deciding who comes into the resident’s room (dropped from 74% to 51%).

**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. Performance improved with having the opportunity to explore new skills and interests (increased from 26% in 2022 to 36%). We maintained performance and are on par with international average for having the opportunity to spend time with other like-minded individuals (52%). There is an opportunity with enjoyable things to do on the weekend as we decreased from 45% in 2022 to 23%, and ways to get to know other residents in the home (having people to do things with me decreased from 48% in 2022 to 35%).

**Food** Scale (3 items; max score 9): This scale gauges residents' satisfaction with food, including their favorite meals, meal variety, and enjoyment during mealtimes. Overall, there was an increase in positive responses related to food and meals. Approximately 71% of residents responded positively to mealtimes. An opportunity is related to providing more variety in meals (we scored approximately 55% in 2023, compared to organizational average of 68%).

**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. In 2023, we focused on “knowing our residents” through utilizing the resident My Experience (ME) forms and educating about the ME forms. We have been able to increase positivity beyond previous performance (staff know the story of my life improved from 19% to 27%). There is more opportunity to foster meaningful relationships between residents and team members.

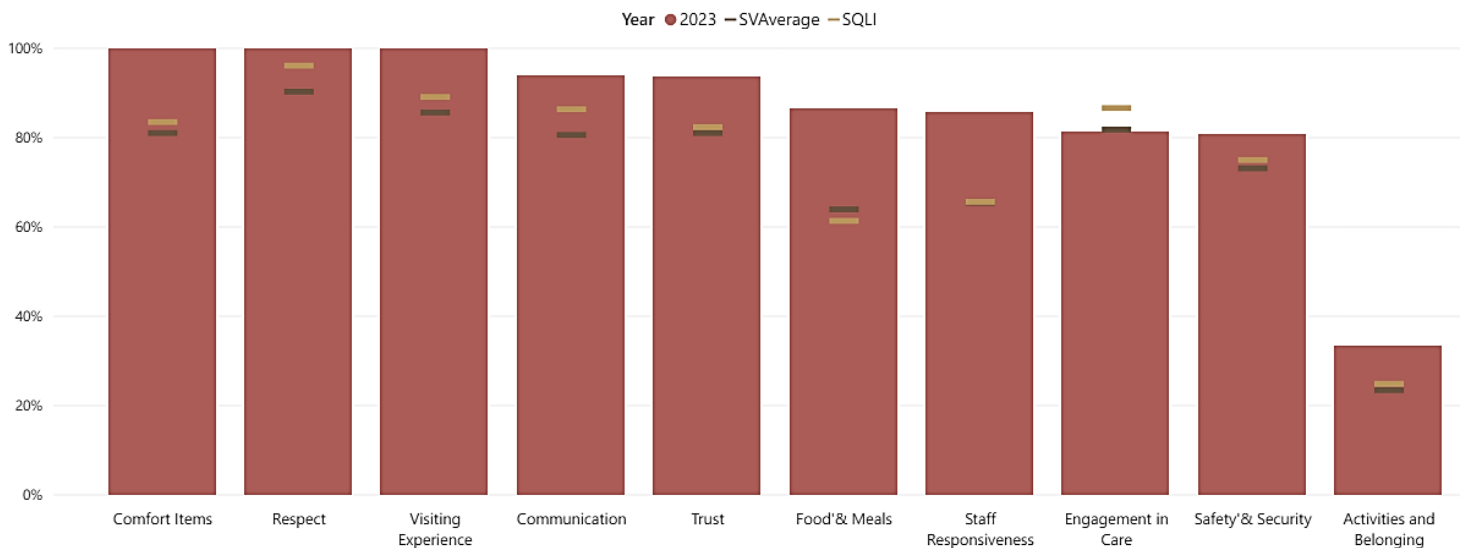
**Family:** The interRAI Family Survey on Quality of Life was developed to measure family members' experiences and perspectives. Families are asked 25 questions, 12 are core items which are similar with the resident survey, and 13 are unique to the family experience. Similar to residents, families are 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 12 responses in 2023. We performed well, scoring higher than available benchmarks in the majority of domains. An opportunity to exceed organizational average is with engagement with care domain.

Overall, we saw positive scores in each of the ten categories of the survey. Here are some of the top scoring indicators;

- 100% positive scores in the "comfort" category, related to the home's clean and welcoming environment and the quality of services available to residents and family members.
- Accessibility of leadership team members, for family members and residents to express their feedback and concerns. All family members who completed the survey indicated that they have at least one person they can contact at the Village if they have one or more concerns.
- Team members at the Village treat me and my family member with respect.
- 91.7% and 80% in the "food & meals" category, related to mealtime enjoyment and variety of meals offered to residents, respectively.

Some of the things we will be working on improving, based on the results, include;

- Fostering community and meaningful friendships between residents.
- Offering meaningful engagement opportunities, catering to our residents' interests and preferences.
- Communication with family members related to changes in a resident's plan of care.



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

The results from the resident QOL survey were shared with Residents' Council on February 1<sup>st</sup>, 2024. Results were also shared through the minutes, which are posted on Main Street for residents, families and team members to access. There is currently no active Family Council at the Village. The results were shared with team members in team huddles throughout the month of February, 2024. The results were also shared with our Continuous Quality Improvement committee at the quarterly Professional Advisory meeting on April 12<sup>th</sup>, 2024.

The results from the family QOL survey were shared with Resident Council on June 6<sup>th</sup>, 2024. We requested feedback for how we can offer the family survey in new ways, to get the participation of more family members who are a part of our Village community. A summary of results was sent out to family members in a memo on May 16<sup>th</sup>, 2024.

### *QUALITY IMPROVEMENT IN 2023-2024:*

We implemented improvements in 2023 to enhance the experience of all those living, visiting and working at the Village.

We refurbished neighbourhood and outdoor areas. On October 10<sup>th</sup> 2023, full landscaping was commenced on the Carrington and Stonechurch courtyards. During the month of June 2023, the Rymal carpets were replaced and vinyl flooring was added in some areas of the neighbourhood. On November 2<sup>nd</sup>-18<sup>th</sup> 2023, all neighbourhoods underwent stain removal and painting.

We have added new roles, including the full-time Director of Quality and Innovation in June 2023, an additional Assistant Director of Nursing Care in March 2023, and a full-time and part-time scheduler in July 2023 and January 2024 respectively. These roles are positively contributing to the quality of care for residents and consistency of team members in the Village.

Our 2022 Resident QOL Survey results for “some of the staff know the story of my life”, and feedback from Resident Council, inspired more focus on the My Experience (ME) form to get to know each resident’s story and interests. In August 2023, we started discussing the ME form regularly in our care conferences with family members. In December 2023, we highlighted 8 resident ME form stories on Main Street. This helped to foster community in the home, and more discussion around the resident ME forms.

Starting in October 2023, credenzas and activity tables were added with Meaningful and Active Engagement (MAE) materials. This relates to the Social Life domain of the resident QOL surveys. In alignment with our Living in My Today (LIMT) signature program, in March 2023, all neighbourhood furniture in the lounge, country kitchen and parlours were reorganized with a thoughtful design, to create intentional set up, and feel natural and comfortable. LIMT is our signature dementia program, developed to support the well-being of residents living with dementia, with emphasis on developing meaningful relationships. The five pillars of LIMT are meaningful and active engagement, enjoyable mealtimes, empowered care partners, thoughtful design and supportive approaches to care.

The improvements discussed in this section were reviewed with our Residents’ Council on June 4<sup>th</sup>, 2024 and recorded in the meeting minutes. The meeting minutes are posted on our Main Street for residents, family members and team members to review at any time.