

CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT 2025-26

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QUALITY IMPROVEMENT PRIORITIES 2025-26:

From our 2024 resident and family survey results, there are two priorities we plan to focus on this year:

1. Reducing noise

Wherever possible, we want to identify and minimize excessive noise in resident spaces to enhance wellbeing. We plan to accomplish this in partnership with our residents to help us identify and target key sources of noise.

2. Reducing incidences of misplaced personal items

With our Village population almost tripling in size over the last few years, welcoming 288 total residents to our Village, the chance of personal clothing items getting misplaced has increased. We plan to improve our procedures for labeling and laundering by investigating our process and focusing in on identified gaps.

We also intend to prioritize these three areas as outlined in our Quality Improvement Plan:

3. Preventing worsened bowel continence

We plan to enhance our best practices for incontinence management and identify more residents who would benefit from a restorative care approach, by introducing continence champions in each neighbourhood.

4. Preventing worsened pain

Our goal is to reduce the frequency of residents experiencing worsened pain through focused analysis and interventions from our clinical leads, nurse practitioner, and doctors.

5. Increasing leadership team education in diversity, equity, inclusion and belonging

As our team and resident populations become increasingly diverse, we want to ensure our leadership team upholds our commitment to help every person know they are valued, respected, and part of the family. This journey will begin with training sessions in anti-racism and inclusion.

PROCESS TO DETERMINE PRIORITY AREAS:

The first priority stems from the resident survey question "I am bothered by the noise here". Our score increased over last year's score, indicating that more residents are bothered by the noise. This was confirmed in Residents' Council meetings and smaller group discussions with residents. The continuous quality improvement (CQI) committee discussed this issue in both our January 2025 and April 2025 meetings, agreeing that it is a top area to focus on.

The second priority stems from multiple places. The family/caregiver survey question "My family member's possessions are secure" scored significantly lower this year than last year. We have also had feedback brought to our attention through Residents' Council and Family Council about missing clothing, as well as being one of our most common

complaint types over the last year. The CQI committee discussed this in our April 2025 meeting and agreed to make improvements in this area.

The third and fourth priorities were determined from our CQI committee reviewing data from the Canadian Institute for Health Information (CIHI) in quarterly meetings over the last year. We have scored higher than the provincial average in the "Worsened Bowel Continence" indicator for several quarters in a row, and we see an opportunity to improve. We also had been scoring higher than provincial average in the "Worsened Pain" indicator, and although our most recent quarter showed improvement, we want to maintain our momentum over the next year. These indicators were discussed in our April 2025 CQI meeting, and the committee agreed to put our efforts towards these important areas.

The final priority was a priority indicator put forth by Health Quality Ontario for 2025-26. It was discussed in our leadership meetings and our April CQI meeting, and the committee considers this a worthwhile initiative.

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

We have spoken to our Family and Residents' Councils. We plan to form a working group of motivated individuals to help us identify opportunities to improve our priority areas and give us feedback on a regular basis. We will monitor our progress in a few ways:

- 1. For the initiatives stemming from survey results, comprehensive 2025 survey data will be available to share in January 2026. However, before then, we will review quarterly progress reports and will regularly communicate progress with both councils.
- 2. For the remaining initiatives (continence, pain, education), they are being tracked under our Quality Improvement Plan (QIP). We have set specific process measures and targets in that plan and our CQI committee will review and discuss progress on a quarterly basis.

As progress is made or changes are needed, we will communicate with our CQI committee quarterly, to our councils during their meetings, send quarterly email updates to our families and team members, and post updates on our Quality & Innovation board outside the main office.

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.

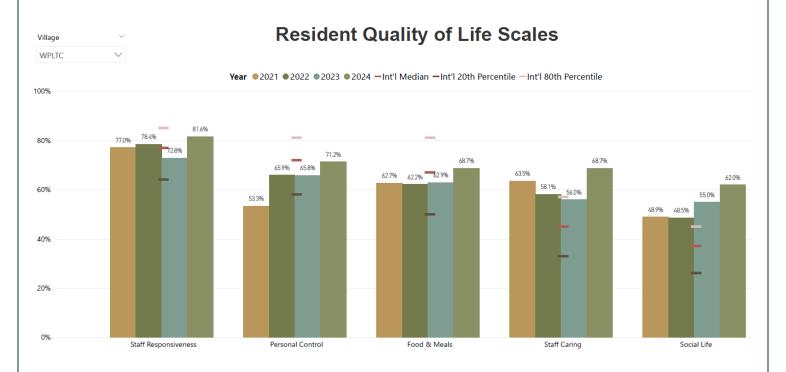
Resident survey: Residents who are able, are given the opportunity to complete the survey annually, around the anniversary of their move-in date. Surveys are run year-round to help eliminate bias. New residents moving into the Village are ideally offered a survey twice in their first year; three months after moving in and then again around their anniversary. The 2024 survey was conducted starting Jan 1, 2024, and ending Dec 31, 2024.

Family survey: Families and caregivers are invited to complete the survey annually. We worked with our Family Council on how to conduct this survey. Our council decided to host a table at our Grand Opening event on October 16 where they spread the word to visiting families, providing them the option to complete the survey on the spot if they were interested. Then a formal email invitation was sent to all families later that day. The 2024 survey was open for

submissions from Oct 16 to Nov 15, 2024. Families were emailed background information and the survey link, and paper copies were made available at the main office.

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 improved on all five scales in 2024. Three scales are within the band of performance including staff responsiveness, personal control and food & meal scales. We are above the international 80th percentile for both caring staff and social life scales. As a village, we received 141 surveys 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. In 2024, we maintained or improved on all questions within this scale. We saw our biggest improvements in the questions "Staff respond quickly when I ask for assistance" (80.9%, up from 62.4% last year) and "If I need help right away, I can get it" (79.4%, up from 62.4% last year).

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 maintained or improved on all questions within this scale. We saw our biggest improvements in the questions "I control who comes into my room" (86.5%, up from 60.6% last year) and "I can go where I want on the spur of the moment" (53.2%, up from 37.6% last year).

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 90% of the questions within this scale. We saw our biggest improvements in the questions "I have people who want to do things with me" (69.5% this year, up from 53.2% last year) and "Another resident here is my

close friend" (56.7% this year, up from 47.7% last year). The question we see the most opportunity in is "I can participate in religious activities that have meaning to me" (65.2%, down from 72.5% last year). After receiving this feedback from residents, we re-aligned our spiritual care program offerings to better align with their interests, and will revisit this topic in upcoming Residents' Council meetings.

Food Scale (3 items; max score 9): This scale gauges residents' satisfaction with food, including their favorite meals, meal variety, and enjoyment during mealtimes. The percentage of residents responding positively increased in all three questions within this scale. We saw our biggest improvement in the question "I get enough variety in my meals" (73.8%, up from 67.9% last year). There is opportunity for improvement in the question "I get my favourite foods here" (51.8%, up from 49.5% last year, but still above 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. Residents responded more positively for all questions this past year compared to 2023. We saw the most improvement in the question "Some of the staff know the story of my life" (56.7%, up from 29.4% last year) and "I consider a staff member my friend" (68.1%, up from 50.5% last year).

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 to 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 75 responses in 2024. We performed well in most domains and are at or above available benchmarks. Opportunities exist within the questions "My family member's possessions are secure" (69.9%), "Staff respond quickly when my family member needs assistance" (77.0%) and "Another resident is my family member's close friend" (20.3%).

Year ●2023 ●2024 —SVAverage —SQLI 100% 95.8% 94.9% 92.9% 91.5% 87.8% 84.5% 85 896 81.5% 80% 34.596 33 896 20% Visitina Respect Comfort Items Engagement in Communication Safety'& Security Staff Food'& Meals Activities and Experience Responsiveness Care Belonging

Family Survey Domains

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

Results of the resident survey were shared with our Residents' Council during their meeting on January 30, 2025. The results were shared with Family Council during their meeting on February 12, 2025. On February 10, 2025, a summary was posted on our Quality & Innovation board outside the main office, and paper copies of full results were posted in the Residents' Council binder near the LTC office that are available for residents, families, and team to access. Team members were also emailed these results on February 20, 2025.

Results of the family survey were shared at a Residents' Council meeting on February 27, 2025, and at a Family Council meeting on February 12, 2025. On March 17, 2025, a summary was posted on our Quality & Innovation board, and copies were made available in our Residents' Council binder near the LTC office for residents, families, and team to access. Results were also emailed to team members on February 20, 2025, and emailed to families on March 22, 2025.

QUALITY IMPROVEMENT IN 2024-2025:

There were a few quality improvements we worked on as a result of 2023 QoL survey results:

- 1. "Some of the staff know the story of my life" (scored 29.4% in 2023, down from 35.9% in 2022): We've been collecting consenting residents' life histories and posting them in a special frame, making it more accessible for team members to find commonalities and build deeper relationships with the residents they support. We first started work on this initiative in August 2023, but despite our efforts for the latter half of the year, we were not able to see improvements in our 2023 survey results. With such a large village and so many new move-ins in 2023, it wasn't surprising that residents did not feel that their stories were known by the team. Residents' Council agreed in their February 2024 meeting that it made sense to keep working on this project. We doubleddown on our efforts in 2024 with the goal of reaching every resident in our LTC tower before we reopened our three original neighbourhoods to 64 new residents in late summer. Progress updates were shared with Family Council in their February 21, March 27, July 24, and October 16 meetings in 2024. Our CQI committee discussed this initiative at every quarterly meeting starting January 10, 2024, and several members of the committee were directly involved in driving the initiative forward. Residents' Council was given updates in their February 29, March 28, June 27, and October 31 meetings in 2024. Updates were included in meeting minutes, which were posted March 8, April 5, July 5, and November 7 respectively in the Residents' Council binder for all residents, families, and teams to access. An update was emailed to families on August 30. Despite growing in size by over 30% in 2024, as of May 2025, over 80% of our residents have a Top Ten posted in their room. In conversations with residents, they have told us they appreciate the chance to share their stories, and team members are learning a lot about the residents they serve. Our 2024 QoL survey results reflected a marked improvement in this area, increasing our score to 56.7% which is significantly higher than organizational average. We plan to continue this practice with every new resident who comes to live in our village, as we see the benefits of better understanding each other.
- 2. "If I need help right away, I can get it" (scored 62.4% in 2023, down from 79.5% in 2022) and "Staff respond quickly when I ask for assistance" (scored 62.4% in 2023, down from 66.7% in 2022): Our Residents' Council requested that we prioritize this area during 2024. Through working with our team members and union, we were able to redesign our PSW schedules in five of our ten neighbourhoods to accommodate a combination of 8-hour and 12-hour PSW shifts, beginning July 1, 2024. The idea was first communicated to team members via email on March 14, 2024, and several in-person information sessions were held later that month. Several members of our CQI committee were directly involved in driving this initiative, and updates were shared with the rest of the committee in our October 23, 2024 and January 29, 2025 meetings. The introduction of our new schedule was communicated to Family Council in their May 22, 2024 meeting, and updates were provided to Residents' Council during their June 27, July 25, and October 31 meetings in 2024. Updates were included in meeting minutes, which were posted on July 5, August 10, and November 7 respectively in the Residents' Council binder for all residents, families, and teams to access. An update was emailed to families on August 30. This new arrangement allows for more caregiver continuity throughout the day, which ensures residents' needs are met more holistically. More flexibility in shift times and durations has made it easier to fill open shifts and avoid shortages. Our 2024 QoL survey results reflected significant improvements in this area ("If I need help right away, I can get it" scored 79.4% and "Staff respond quickly when I ask for assistance" scored 80.9%). We are hoping to further expand this new scheduling structure to additional neighbourhoods over the coming year.

There were several improvements we made during 2024 that came from sources other than surveys:

- 1. Fall prevention through Comfort Rounds: last year our goal was to reduce falls by introducing a new practice we refer to as "Comfort Rounds". This strategy encourages the team to frequently check in on the residents who are at the highest risk of falls, ensuring their current and near-future needs are met in order to reduce the chance of a fall. Between April 1 and December 31, 2024, we focused on trialling this method with team members and expanding it to new neighbourhoods as we made improvements. Our CQI committee had been reviewing quarterly falls data in our January 10th meeting and then decided to prioritize this initiative. We brought the idea to the February 29th Residents' Council meeting and they agreed it was a worthwhile area to focus on. Subsequent updates were provided to Residents' Council in their June 27th and October 31st meetings. Updates were posted in the council's meeting minutes binder on July 5th and November 7th respectively which is accessible to all residents, families, and team. Family Council was provided with updates in their July 24th and October 16th meetings. An update was emailed to families on August 30th. Several members of the CQI committee were directly involved in rolling out this practice, and our committee discussed progress in our July 10th and October 23rd meetings. By the end of 2024 we saw an improvement in our quarterly CIHI data, reducing our falls indicator score to 13%, which outperformed the provincial average of 15.4%. We continue our Comfort Rounds practice to this day, as it has proven to be effective in our village.
- 2. Enhanced practices for reducing pain and pressure wounds: last year our goal was to reduce worsening pain and pressure wounds by introducing monthly interdisciplinary review meetings and targeted coaching for nurses. Starting on April 1, 2024, our clinical leadership team worked together to audit and coach nurses on their assessment and treatment practices, while meeting monthly with an interdisciplinary team to discuss holistic interventions. Our CQI committee had been reviewing quarterly wounds and pain data in our January 10th meeting and then decided to prioritize these initiatives. Residents' Council was consulted in their February 29th meeting and they agreed these were important concerns. Once we started these practices, updates were provided to Residents' Council in their June 27th and October 31st meetings. Updates were posted in the council's meeting minutes binder on July 5th and November 7th respectively which is accessible to all residents, families, and team. Family Council was provided with updates in their July 24th and October 16th meetings. An update was emailed to families on August 30th. Several members of the CQI committee were directly involved in these improvements, and our committee discussed progress in our July 10th and October 23rd meetings. By the end of 2024 we saw improvements in our quarterly CIHI data: our score for worsened wounds had reduced to 2.8% (beating the provincial average of 3.3%) and our score for worsened pain reduced to 8.5% (beating the provincial average of 9.5%). To maintain our momentum, we have continued these practices in 2025, and may apply a similar approach to other clinical concerns as they arise.
- 3. Opening the latest redevelopment of our original three neighbourhoods: Over the last few years, our village had been under construction—first to build a new LTC building, and then to redevelop the original three neighbourhoods of Winston Park that had been in operation since 1991. On July 29, 2024 we were very excited to open our final phase of the project and welcome 64 new residents, bringing our village to a total size of 288. The redeveloped space includes more open and inviting common areas with brand-new furniture and equipment. Most of the members of our CQI committee were involved in opening this new space in one way or another—through staffing and move-in coordination, cleaning and stocking, and helping new residents settle in. This phase of construction was 16 months in the making, but as we approached our completion date, we ensured more focused communication. Residents' Council was updated in their February 29th, March 20th, and June 27th meetings. An online Townhall meeting was held on July 9th for interested families, residents, and team members. Family Council discussed the project in their July 24th meeting and several members volunteered during the Grand Opening Celebration on October 16th. Feedback from residents, team, and families has been very positive—residents appreciate the beautiful courtyard and bright common spaces, giving them more opportunities to meet likeminded residents and host family guests.