



Quality Progress Report for 2023

Caressant Care Marmora

March 2024

Caressant Care Nursing and Retirement Homes Ltd.

Brief Summary of Quality Improvement Achievements fiscal year 2023:

Building and Environmental Improvements:

Fresh paint completed in all hallways.

Front entrance ramp completed.

Update to resident rooms started and continues (patch, paint, floor strip and wax)

Call Bell system update completed.

New eavestrough installed.

Clinical Programs:

The following clinical programs have been reviewed and revised in 2023: continence management, IPAC and responsive behaviours. We are continuing to enhance the use and functionality of our electronic documentation system by scheduling assessments and updating the care plan library.

Additionally, we implemented the following:

- Skin and wound program revamp – utilizing clinical dashboard vs. paper assessment.
- We also participated in several lunch and learn sessions to enhance care planning knowledge.
- Initiated internal BSO committee.
- Botox Spasticity Clinic

Communication and Technology:

Caressant Care continues to update and revise our infrastructure by updating WIFI and connections.

We continue to implement our communication strategy with more mobile devices, so we can connect residents and people of importance to them virtually. We continue to encourage the use of virtual technology and software to participate in Communities of Practice both internally within Caressant Care and externally with our community partners.

Additionally, we introduced four large tablets to the floor and improved the attendance management program by introducing shift replacement form.

Caressant Care continues to update and restructure our online learning management system to ensure required education modules are available and current.

Compliance and Conformance

In 2023 we began an extensive auditing process. The Comprehensive Proactive Home Visit through the corporate clinical and operations teams with subject matter experts doing a thorough review with several audits for every department. Corporate team members complete various audits and identify gaps. Once completed, a plan is created with corrective actions and dates for implementation.

Additionally, a process has been implemented for any compliance issues, with a monthly call where action plans are reviewed, updated, and revised with opportunities for discussion and support to assist in moving forward.

The corporation continues to manage any areas of non-compliance through our centralized reporting system. Caressant Care continues to support a learning environment as it pertains to compliance by sharing information about inspections with all homes through our Compliance Key Messages, and Compliance Communication Tips program.

Infection Control:

Caressant Care recognizes the correlation between infection control practices and keeping our residents safe. Caressant Care has supported the introduction of a dedicated IPAC lead. Monthly community of practice calls were implemented for networking and sharing resources. A comprehensive review of all IPAC policies and procedures was completed in 2023 to ensure that policies and procedures are current and align with best practices with a certified IPAC professional.

The re-implementation of the IPAC Module in PCC along with the development of various corporate tracking tools has now allowed for homes to begin trending and analyzing of IPAC data.

Other IPAC initiatives include but are not limited to:

- 17 iso and garbage carts purchased to meet compliance and improve IPAC procedure during outbreak.
- Additional PPE/isolation caddies purchased.
- Electrostatic sprayer x 2 put into use.
- Implemented glo germ for housekeeping audits.
- IPAC Lead completed Certification through infection control at Queen's University
- IPAC Hub of Kingston involved for in house review.

Equity and Indigenous Health

Caressant Care is committed to driving improved and equitable outcomes to reduce health inequities in our organization and to ensure appropriate treatment of all individuals regardless of race, gender identity and/or expression.

All management and supervisors completed cultural awareness and safety education modules which includes Indigenous Relationship and Cultural Awareness courses, anti-Black racism, and gender diversity education modules.

Resident and Family Experience:

Surveys are completed throughout the year, and summarized semiannually with results returned to the home, to be communicated and reviewed for improvement initiatives. This process supports a nimble turnaround time for actionable items.

We had some positive results indicating a high level of satisfaction with areas on the Resident Satisfaction Survey, some examples are below:

- ✓ Residents get the health services they need – 87 %.
- ✓ Residents feel staff pay attention– 87 %.
- ✓ Residents enjoy mealtimes – 77%.

Families additionally had positive feedback in many areas, some examples are:

- ✓ Loyalty Question – Would you recommend this organization to others? 75%
- ✓ Staff engage in friendly conversation 88 %.

Based on feedback received from residents and family members we have again revised our Satisfaction Survey process. We have streamlined the survey with relevant questions and created a shorter survey with less options to answer questions and a comment section to provide further feedback, as well as added “if I wish to” as ultimately resident choice is our number one priority.

Caressant Care Marmora hosted a Fun Fair open house that was a great success. This included community vendors, family volunteers and saw a wonderful turnout. We revamped our move-in process to improve positive experience and improved the tour process for booking and person most responsible.

Quality Program

We continue to revise on an ongoing basis and update many of our policies, education packages, program audits and operational audits to reflect and improve quality practices and to align with the relevant legislation.

Other Comments:

In 2023, Caressant Care Marmora saw an increase in hiring and a decrease in need for agency coverage overall. We had success in recruitment efforts resulting in:

- ✓ PSW agency needs down to zero on a typical week.
- ✓ 1 RN hired in 2023.
- ✓ 3 RPNs hired in 2023.
- ✓ RN and RPN vacancies have been filled with consistent agency personnel.
- ✓ 3 PSW students completed placement and later took a position.

Because of this, continuity of care is far more reliable, allowing residents the opportunity to get to know their care givers.

Introduced new Life Enrichment Coordinator and Environment Services Supervisor positions.

After a hiatus during COVID, Caressant Care Marmora made education and training plan a priority:

- ✓ External education provided by Providence Care for team members regarding BSO.

- ✓ Approximately eleven team members attended fully funded GPA education.
- ✓ Four PSWs, one activity aide and one RN attended training in palliative care fundamentals.
- ✓ One Dietary Aide graduated from the Food Services Worker program.

To increase staff morale and introduce fun and recognition to the workday, a full day Team Appreciation Celebration was implemented. Team members enjoyed food, games and awards. The Life Enrichment Coordinator also planned and implemented special weeklong events to recognize each department (Care Team Week, Activity Awareness Week etc.).

Progress Summary from our Quality Plan 2023

Please see attached QIP Progress Report for 2023.

Experience | Patient-centred | Custom Indicator

	Last Year		This Year	
Indicator #1	68	75	70	NA
Resident experience: Overall satisfaction "I can express my opinion without fear or consequences." (Caressant Care Marmora)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 Implemented Not Implemented

1. The home plans to recruit and train volunteers to assist with the resident survey. 2. Managers will support an open-door policy, ensuring accessibility to residents. 3. Invite residents to attend committee meetings so they have an opportunity to express concerns. 4. Engage staff and residents regarding survey results and initiative to seek further ideas for improvement that could be implemented. 5. Resident rights are shared at meetings and further discussion with team members regarding rights.

Process measure

- % increase in satisfaction evidenced by surveys throughout the year

Target for process measure

- The home will endeavour to increase the % of residents that respond positively to the survey question: "I can express my opinion without fear of consequences." to 75 % by December 31, 2023.

Lessons Learned

More attention was given to ensure residents had the opportunity to complete the survey in 2023, so completion was not a problem. A plan was implemented to allow residents the opportunity to complete the survey near the end of the year, to determine if improvements were made or still needed.

It is important to be able to identify why there is a fear of consequence when expressing opinions to improve this. Are team members addressing residents with respect and dignity, are questions and concerns taken seriously and addressed appropriately. The attention for 2024 will be on leader and team member response to residents (Person-centred Language, GPA, and Customer Service).

Comment

We will continue to work on this QIP for improved results.

Indicator #2	Last Year		This Year	
	Resident experience: Overall satisfaction Staff take the time to have a friendly conversation with me. (Caressant Care Marmora)	62 Performance (2023/24)	75 Target (2023/24)	77 Performance (2024/25)

Change Idea #1 Implemented Not Implemented

1. Provide personal information about residents (for example - likes/dislikes/hobbies/interests/family) for awareness to all staff and to promote opportunities to engage. 2. On Admission huddles with all staff to inform them of new resident likes/dislikes and some history to promote resident-centred care. 3. Educate staff to utilize down time to promote interaction with residents and include residents in conversations when working.

Process measure

- % increase in satisfaction evidenced by surveys throughout the year

Target for process measure

- The home will endeavour to increase the response % of residents that respond positively to the survey question: “Staff take the time to have a friendly conversation with me” to 75 % by December 31, 2023

Lessons Learned

Improving staffing levels has increased continuity of care, by reducing the use and turnaround of agency staff. Team members can get to know the residents and build rapport.

With stable staffing, team members are less rushed and able to spend a few extra minutes with residents after care is completed, which has helped us to exceed our target for this QIP.