



# Quality Progress Report for 2023

Caressant Care Courtland

March 2024

Caressant Care Nursing and Retirement Homes Ltd.

## **Brief Summary of Quality Improvement Achievements fiscal year 2023:**

### **Building and Environmental Improvements:**

We initiated a large project to remodel our current shower rooms to include resident bathtubs. This project will be completed in May of 2024.

Additionally, we had some lighting upgrades.

### **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.

We also participated in several lunch and learn sessions to enhance care planning knowledge.

### **Communication and Technology:**

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

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

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.

### **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.

### **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 have (or will) 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 – 92 %.
- ✓ Residents enjoy mealtimes – 100 %.

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

- ✓ Families feel Residents privacy is respected - 100%.
- ✓ Families would recommend us – 86%.

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.

### **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.

## **Progress Summary from our Quality Plan 2023**

Please see attached QIP Progress Report for 2023.

	Last Year		This Year	
<b>Indicator #2</b>	<b>62</b>	<b>75</b>	<b>33</b>	<b>NA</b>
Resident experience: Overall satisfaction Staff take time to have a friendly conversation with me. (Caressant Care Courtland)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

**Change Idea #1**  Implemented  Not Implemented

1. Provide education and awareness to staff to promote resident-centred care and encourage staff to further engage with residents whenever opportunities allow. 2. Discussion at team meetings and Resident Council regarding survey results and engage staff and residents for their input and ideas to improve. 3. Continue to recruit vacancies and reduction of agency staff to provide consistent care providers who know residents to increase their comfort level and familiarity with those providing care.

**Process measure**

- % increase in satisfaction evidenced by survey results throughout the year

**Target for process measure**

- The home plans to increase the satisfaction of residents to 75 % by December 31, 2023 to the survey question - Staff take time to have a friendly conversation with me.

**Lessons Learned**

- HR challenges sometimes do not afford the opportunity for engaged conversation.
- Some residents may not wish to have conversation with staff, so have updated the survey question to indicate if I wish them to.

**Comment**

As we were not successful with this QIP, we will continue with a focus to improve with a revised target based on 2023 results.

**Safety | Safe | Custom Indicator**

	Last Year		This Year	
<b>Indicator #1</b>	<b>3.47</b>	<b>2</b>	<b>4.20</b>	<b>NA</b>
Resident care: Skin and Wound Care (Caressant Care Courtland)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

**Change Idea #1**  Implemented  Not Implemented

1. Re-educate 100% of direct care staff (PSWs and Registered Staff) on preventative strategies using the RISE program, supplements and hydration and safe lifting techniques and education on ROHO cushions. 2. Review wound care champion (WCC) job routine and implement changes to improve skin and wound program in the home. 3. Implement an audit tool/resource for the skin and wound nurse to complete weekly to review practices in the home. 4. Review individual resident’s continence plan of care and ensure incontinence is addressed as per TENA portraits.

**Process measure**

- % residents with new stage 2-4 pressure injuries

**Target for process measure**

- The home will endeavour to reduce the number of residents with new stage 2-4 pressure injuries from 3.47 % to 2% by December 31st, 2023.

**Lessons Learned**

- The home has a very low number of residents with new pressure ulcers and has since rolled out the updated corporate skin and wound care program with a designated wound care champion to support an increase in skin health. We feel we have a good program in place and have decided to focus on other areas of the resident experience which may be more meaningful to the larger population of residents.