Quality Progress Report for 2023

Caressant Care Harriston

March 2024



Brief Summary of Quality Improvement Achievements fiscal year 2023:

Building and Environmental Improvements:

- Back Patio (new deck) was built in the spring of 2023.
- Electrical 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. In addition, the spasticity program was successful, and we also utilized the BOOMR program.

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. Other technology and communication initiatives include:

- Continued use of ONE CALL NOW for communication to residents, families, and staff.
- Purchased IPADS for resident use.
- WIFI service is available for residents and guests.
- Utilization of the HH audit application technology

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 though 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 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: (add in your own examples of areas where you scored high.)

- ✓ Residents get the health services they need 100 %.
- ✓ Residents feel privacy is respected 100 %.

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

- ✓ Loyalty Question Would you recommend this organization to others? 87%
- ✓ Families feel privacy is respected 85 %.

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	
Indicator #2	45	75	82	NA
Resident experience: Overall satisfaction Enjoy Mealtimes (Caressant Care Harriston)	Performance (2023/24)	Target (2023/24)	Performance (2024/25)	Target (2024/25)

Change Idea #1 ☑ Implemented ☐ Not Implemented

1. Utilize the Food Committee to discuss and engage residents regarding resident meal choices, individualized preferences, atmosphere and overall satisfaction. 2. Decorating the Dining Room monthly based on a holiday or theme of the month. Tablecloths, themed placemats and napkins will be utilized. 3. Revitalize dining rooms and decorate with new signage for each dining room. 4. Provide food samples from vendors with new products for residents to try during the Food Committee. 5. Discussion at team meetings and Resident Council regarding survey results and engage staff and residents for their input and ideas to improve.

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 at least 75 % by December 31, 2023, to the survey question – I enjoy mealtimes.

Lessons Learned

We are pleased with our results for exceeding our target for this QIP.

	Last Year		This Year	
Indicator #1	75	80	88	NA
Resident experience: Overall satisfaction	75	80	00	INA
"I can express my opinion without fear of consequences." (Caressant Care Harriston)	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 80 % by December 31, 2023, to the survey question - "I can express my opinion without fear of consequences."

Lessons Learned

We are pleased with our results for exceeding our target for this QIP.