



Quality Plan and Report

Caressant Care Harriston

March 2024

Caressant Care Nursing and Retirement Homes Ltd.

Background:

At Caressant Care continuous quality improvement (CQI) is a transparent process and an effective way to improve care for residents and to improve practice for team members. Quality improvement is not a linear process, and we believe there are always opportunities to be innovative, optimize, streamline, and revise or develop new processes for clinical and operational effectiveness and efficiency. CQI is an ongoing process and considered an integral part of everyone's work, regardless of role or position within the organization.

Caressant Care is committed to resident-directed, safe, quality care that responds to a resident's physical, psychological, emotional, social, spiritual, and cultural goals and needs and is respectful of every resident's individual identity and history and fostering an inclusive environment that supports continuous quality improvement and innovation.

Introduction:

Input for improvement is obtained in a variety of ways.

Caressant Care participates in a voluntary accreditation process through CARF International. In 2024 we will be participating in the CARF Survey process.

Additionally, Caressant Care seeks input from residents, families, persons of importance to residents, and team members through an ongoing survey process. Surveys are summarized semi-annually, and results are shared with residents, team members and families. Opportunities are provided for input and feedback on determined prioritized actions and objectives for quality improvement from residents and families as well as the CQI Committee.

Feedback is sought through resident driven committees such as the Food Committee and Resident's Council as well as Family Councils where suggestions and concerns can be brought forward.

Information about obtaining feedback, concerns and complaints is shared with residents and their designates at move in, and team members are provided information on improvement processes and initiatives when onboarding and on an annual basis. Active engagement is sought through departmental meetings such as, Town Halls, and interprofessional meetings such as Professional Advisory Council and Continuous Quality Improvement meetings which are held regularly where Quality Improvement plans are reviewed and discussed.

Priorities and targets are determined through internal and external benchmarks, audits, legislation, program evaluations and other reviews such as the Ministry of Long-Term

Care, Ministry of Labour, Public Health Units, or other internal or external stakeholder inspections.

A variety of QI processes and tools may be utilized in the QI process. In addition, an individual Quality Improvement Plan will be submitted to Health Quality Ontario (HQO) on an annual basis.

The attached plan provides our quality commitment priorities that Caressant Care has made to residents, team members, and community partners to improve specific quality issues through focused targets and actions.

Definitions:

Health Quality Ontario is a provincial agency and the province's advisor on health care quality. The role of Health Quality Ontario is to monitor **and report on how the health system is performing**, provide guidance on important quality issues and assess evidence to determine what constitutes optimal care.

Resident-Centred Care is a model of senior care that invites, accommodates, and respects residents' personal wishes and desires in health care.

CIHI Canadian Institute for Health Information (CIHI) provides comparable and actionable data and information that are used to accelerate improvements in health care, health system performance and population health across Canada.

Continuous Quality Improvement (CQI) Committee

Our designated QI lead is Tracey Freeman

Our Terms of Reference for the CQI Committee for membership include but may not be limited to: Executive Director, Director of Care, Medical Director, each designated lead of the home, registered dietitian, pharmacy consultant, personal support worker and nursing staff representation, other professionals as well as representation from Resident and Family Councils, if available.

Main Responsibilities of the CQI Team

1. To monitor and report to the long-term care home licensee on quality issues, residents' quality of life, and the overall quality of care and services provided in the long-term care home, with reference to appropriate data.
2. To consider, identify and make recommendations to the long-term care home licensee regarding priority areas for quality improvement in the home.
3. To coordinate and support the implementation of the continuous quality improvement initiative, including but not limited to, preparation of the report on the continuous quality improvement initiative.

Quality Improvement and Operations

1. QI Initiatives may be identified through various means such as satisfaction surveys, concerns or complaint reviews, informal and formal meetings, weekly walkthroughs, or through other program evaluations, audits, or compliance. Once initiatives are determined and identified by the CQI Team they can be addressed on a priority basis, determined through feedback, based on high risk or resident and/or family satisfaction feedback.
2. A QI Plan will be developed and implemented with reporting back to the CQI Team and information will be shared with residents, families, and team members. Transparency is the key to success. The PAC/CQI will review and update quality initiatives at regular meetings throughout the year, and course adjust, as necessary. Outcomes will be communicated, and progress reported back to the Resident's Council and families, as well as team members.
3. Policies, procedures, audits, and other resources are available to all team members on our online policy software and can be made available to others on request.
4. Caressant Care continues to revise the quality program with our comprehensive document for reporting and tracking indicators. The "Roadmap to Success" has monthly tasks, meeting templates, scheduled monthly tasks, operational and program evaluations, as well as documenting clinical and operational indicators. This document is posted on a shared drive and can be accessed by both the home and corporate team. This document demonstrates our accountability and commitment to quality.
5. Distribution of the quality plan and report will be observed on our website, with copies provided to the Resident's Council, families, as well as available in the home.

Brief Summary of Quality Improvement Initiatives fiscal year 2024:

Overview

At Caressant Care we continue to improve programs and services as well as home enhancements as detailed below. We recognize the importance of consistent care and continue to collaborate with community partnerships to enhance our programs and strengthen our health human resources.

Building and Environmental Improvements:

We continue to enhance our maintenance program and plan to undertake a comprehensive review of maintenance tasks on our online software system to improve service and efficiency.

Some environmental goals or improvements planned for 2024:

1. Roof repairs
2. Upgrades to parking lot
3. Sprinkler system
4. Painting throughout the building
5. Renovating some resident room bathrooms
6. Upgrade lighting to LED lighting.

7. Nursing Desk #2 needs to be renovated.

Clinical Programs:

The following clinical programs have been reviewed and revised and we are continuing to roll them out into 2024:

We are implementing a new program to enhance medication safety through bar coding. We have a plan to review and update restorative care programs. We are continuing to enhance the use and functionality of our electronic documentation system by scheduling assessments, updating the care plan library, and including the development of a care plan resource binder.

We replaced all our lifts in March of this year. These lifts will include weigh scales to promote consistent weight review.

The home has purchased the following:

3 pill crusher packs with automatic pill crusher machine.

Bladder scanner

Treatment cart

Examination head that can be switched to either an otoscope and an ophthalmoscope.

Suction Machine

Wireless bed and chair alarms and pads

10 Stethoscopes

Vascular dopplers

Communication and Technology:

Caressant Care as a corporation has updated and restructured our online learning management system as well as added new improved assessments into the care plan library. Caressant Care has an online policy system, as well as a comprehensive library on our learning management system, which promotes a more user-friendly system for employees. We continue to add extensive resources to our library such as “how-to’s” and other relevant information.

We continue to review our communication strategy, and have increased our use of mobile devices, so we are able to connect residents and people of importance to them virtually. We have enhanced our use of virtual technology and software to participate in Communities of Practice both internally within Caressant Care and externally with our community partners.

We also are continuing to upgrade our internet systems to improve WIFI throughout the building as well as use of a companion app which connects directly to our electronic documentation system. This should promote efficiency and streamline data flow.

We have streamlined and automated our accounts payable process for redundancy and efficiencies when paying invoices.

Additionally in 2024 we plan to roll out new scheduling system software, Project Amplify, and have 10 new upgraded laptops that are equipped with hi speed processor and long-lasting batteries.

Compliance and Conformance

We have a centralized system for any legislated compliance reports, all reports are sent to the Risk Management email. Once received, a corrective action template is sent (if required) to complete with support from the regional team, and a centralized catalogue of all reports is maintained. There is also a system in place to communicate and share any areas of concern for follow-up and awareness to the homes.

Infection Control:

Caressant Care recognizes the correlation between infection control practices and keeping our residents safe. With an even greater emphasis since the COVID-19 pandemic, we have continued to enhance our Infection Control processes by increased auditing in areas such as hand hygiene, passive screening, PPE, and dietary and housekeeping processes. As a result of these audits, we have enhanced our cleaning processes, and will continue to engage with our local IPAC Hub. Additionally, Caressant Care has appointed an Infection Prevention and Control (IPAC) Lead to support the home as well as providing training/education, policy development, and outbreak management. To further optimize IPAC practices, Caressant Care continues to carefully review trends and analyze data with support to IPAC Leads with additional education, training, and community of practice sessions.

Resident and Family Experience:

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

Based on feedback from residents and family members we have revised and streamlined our surveys for 2024 and increased opportunities for participation with paper, QR Codes, online links and support or assistance provided with in person or telephone options. We have also added an option to provide additional information for each category.

A survey summary for 2023 results is attached with determined areas of improvement. Detailed results of the surveys are posted in the home.

Leadership Development

Caressant Care recognizes the impact of our leadership team on overall operations and health human resources management and have contracted with a Professional Certified Leadership Coach to provide monthly interactive virtual training sessions for all management team members. These sessions may

enhance and build on our current management team members skillset(s) and support a culture of cohesiveness and a more collaborative workplace.

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 have) completed cultural awareness and safety education modules which includes Indigenous Relationship and Cultural Awareness courses, anti-Black racism, and gender diversity education modules. Planning is in place to enhance services and provide further education in these areas on a broader scale.

Provider Experience

It continues to be a challenging time for health care organizations with unprecedented human resources challenges. Caressant Care endeavors to improve workplace culture, by providing education incentives, and carefully reviewing and listening to our team members. We have reviewed our Team Member survey results and plan to focus on indicated areas.

We continue to appreciate and recognize team members through celebrations and activities such as BBQs, Christmas parties, health care workers week and gift cards for completing Surge learning.

Safety

Caressant Care will be conducting a comprehensive review of the Health and Safety Program with an expanded role at corporate office including internal health and safety policies and developing policies, programs and education aimed at enhancing health and safety compliance and accident reduction.

We have upgraded the PSW utility carts for ease of movement for laundry and garbage.

The home has received 13 new floor lifts for ease of transferring residents for bathing, toileting, and bed. The home continues to provide supervision for high-risk residents.

The home continues to work with BSO team and PRC to educate staff on interventions as well as utilizing community resources such as the Psychogeriatric Assessment team to aid in responsive behavior management.

The management team continues to have an open-door policy for staff to bring forward any concerns they may have regarding health and safety.

Population Health Approach/Community Partnerships

The home has partnered with PREP LTC and Maxwell Agency to train new PSWs. and partnered with The home is using CCPN funding to attract nurses for the home. Caressant Care offers a sign on bonus for new PSW's and Nurses.

We continue to hire summer relief and students in hopes of future employment.
We access our community partnerships through events and meetings.

Access and Flow

Optimizing system capacity with timely access to care, and the experience of care for residents is important to us. Caressant Care is working in partnership and across care sectors to avoid unnecessary hospitalizations and to avoid visits to emergency departments whenever possible and to promote seamless transitions of care.

Project Amplify should help with resident improvement by allowing the home and the connecting facility to share resident health information to help support resident centered care.

Having access to clinical connect supports the home in real time to access electronic information needed i.e., Home and Community Care Support Services, hospitals etc.

The home has created an in-house palliative care room to facilitate comfort, privacy, and respect for both the family and the resident.

Resident-Centred Care

We continue to promote our resident-centred philosophy with a focus on language in 2024. We plan to discuss and engage team members at each meeting with a brief discussion of language and examples of resident-centred care, as well as other initiatives throughout the year.

QIP Information

Summary Goals (Detailed) 2024 attached.

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who respond positively to the statement "I can participate in meaningful activities if I wish to"	C	% / LTC home residents	In-house survey / Jan - Dec 2024	CB	75.00	Recent discussion(s) indicate residents would like more programs and variety in the activities currently offered.	

Change Ideas

Change Idea #1 Increase resident engagement through more interactive activities. Request suggestions and solicit input from residents and team members on desired programs and opportunities. The activity department to add a variety of interactive programs each month to attract others who may not be interested in what is currently being offered based on feedback.

Methods	Process measures	Target for process measure	Comments
Review calendar of activities at Resident Council and seek input. Review survey feedback for ideas from residents and families. Encourage use of suggestion box for ideas. Monitor survey responses and utilize feedback.	-percentage positive responses to the statement "I can participate in meaningful activities if I wish to"	The home endeavours to obtain a 75 % percentage positive responses to the statement "I can participate in meaningful activities if I wish to" in resident satisfaction surveys by December 31, 2024.	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Increase overall team member/workforce engagement to support consistent quality resident care	C	% / Staff	In-house survey / Jan - Dec 2024	64.00	70.00	Engaged team members are more committed to their roles, leading to consistent quality of care. They are invested in providing responsive and compassionate services to our residents.	

Change Ideas

Change Idea #1 Increase staff engagement through open forum discussion at meetings, appreciation days and suggestions.

Methods	Process measures	Target for process measure	Comments
Information will be recorded during meeting minutes and reviewed at CQI meetings	Utilize the suggestion box monthly, encourage participation with staff appreciation. Continue with managers having an open door policy. Nursing week to be Health Care workers week and all team members are included in the daily events/draws.	The home will aim to improve overall percentage of engagement by 6 % to 70 % through the team member satisfaction survey by December 31, 2024.	



CARESSANT CARE
NURSING & RETIREMENT HOMES LTD.
Resident and Family Satisfaction Surveys
Summary and Plan of Action

Resident Satisfaction Survey			
Date: January 25th, 2024		Number of Participants: 6	
Overall, our Resident survey for 2023 is very good with many improvements in all areas.		Leadership Team	
Top 3 Areas of Improvement	Plan	Responsible Person(s)	Date:
1. We would again like to focus on “resident enjoy mealtimes” Although this is 82%, we feel there is still room for improvement.	Continue to encourage residents to attend food committee and/ or present their comments or suggestions directly to the FNM for further investigation.	Activation Dept FNM	On going
2. Demonstrating two show plates for mealtimes	Host dietary in services to reiterate meal service P&P to all staff including the show plate option and second meal option that is available for both lunch and supper. Demonstrate the procedure for “showing” the meal options by dietary as per MLTC WN December 2023 compliance inspection. Review key compliance messages regarding dietary issues. Explain the new meal options and show plates to residents at food	FNM	On going

		committee.	
3. We would like to also focus on Resident’s “can decide what to wear.		<p>This goes hand in hand with our homes “resident centered” focus for this year.</p> <p>increase staff awareness about allowing residents to choose their clothing by adding this in Nursing Team member meetings. Including how to ask non-verbal residents to participate in this decision making (i.e. point)</p> <p>Encourage residents who are able to voice their choices to team members.</p>	
Top 3 Successes:			
1. We are happy to report that Residents surveyed feel their privacy is respected 100% of the time.			
2. We are very pleased that our resident’s feel they can get the health services they need 100% of the time.			
3. We have a very large increase year over year for residents enjoying mealtimes = 82% this year vs 45% of the time last year. Our goal from previous year to attain at least 70% satisfaction was attained.			
Survey Feedback	Date:	Comments:	
Shared with Residents:	February 8 2024	To be shared at next resident’s council Feb 8 th 2024	
Shared with Staff:	February 2024	To be shared at all staff meetings Feb 2024 and additionally via one call now	
Shared with Others:			
Shared with Family:	February 2024	To be reviewed at next family council meeting Feb 2024	
Shared with CQI/PAC as applicable	April 2024	To be reviewed at next PAC/ CQI – April 2024	
Any Changes requested to survey:	Yes <input type="checkbox"/> No <input type="checkbox"/>		

Family Satisfaction Survey

Date: January 25th 2024

Number of Participants:
Judy Llamido, ED
Melissa Purcell, BOM
Tracey Freeman – RHM/ interim ED
Janice Stahlke – FNM
Angela Henao – RCC
Albert Militante – DOC

Top 3 Areas of Improvement	Plan	Responsible Person(s)	Date:
<p>1. We like to focus on “food” Although this is 72%, we feel there is still room for improvement</p>	<p>Continue to encourage family members to attend family council and/ or present their comments or suggestions directly to the FNM for further investigation.</p> <p>Explain revised menu plan to family council.</p> <p>Explain resident’s food committee to family members</p>	<p>ED / FNM</p>	<p>On going</p>
<p>2. Focus on “residents can explore new skills and interests” this is only 31% - we show some improvement over last year however this can be improved more.</p>	<p>Management team continues to work with Activation department to come up with new activities for residents.</p> <p>Survey residents, and / or families for suggestions of new programs to explore. – address at family council meeting Encourage use of the suggestion box outside BOM office. Review the suggestions at CQI meeting where families and residents attend.</p>	<p>Management Team / ED</p> <p>Activation Director</p>	

	<p>Encourage / advertise for volunteers to come into the home</p> <p>Post signage in the home inquiring to family members / visitors if they have any talents to share.</p> <p>Ask team members / other residents if they have any “special talents” that they would like to share with resident’s or host a how-to demonstration.</p>	<p>Activation Director</p> <p>Activation Director</p> <p>Activation Director</p>	
3. Work on improving care and support of family member	<p>Continue constant communication with families from nursing team. Will continue use of one call now platform for home updates.</p> <p>Encourage families to attend care conferences so they can stay up to date with loved ones progress.</p> <p>Encourage families to use suggestion box.</p> <p>Encourage family members to participate in PAC/ CQI quarterly</p>	ED / nursing team	On going
Top 3 Successes:			
1. We are pleased that families surveyed feel that staff respond quickly when their loved one needs assistance 83% of the time. A great improvement over last year 73%			
2. We are pleased that family members feel our staff engage in friendly conversation 73% of the time			
3. We see an improvement in can bathe or shower anytime has increased to 49% vs 35% in 2022 survey			
Survey Feedback	Date:	Comments:	
Shared with Residents:	February 2024	Next Resident Council Feb.	
Shared with Staff:	February 2024	Next team member meetings Feb	
Shared with Family:		Next Family Council meeting	

Shared with Others:	April 2024	Next PAC meeting in April
Shared with CQI/PAC as applicable:	April 2024	
Any Changes requested to survey:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Revisions to the questions in regard to bathing – in LTC it is almost impossible to allow bathing at any time due to staffing routines and complicated residents who need assistance. We feel this makes families think their loved ones don't get bathed frequently enough.