



Quality Plan 2025

Caressant Care Fergus

March 2025

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 were awarded a 3-year accreditation.

Additionally, Caressant Care seeks input from residents, families, people 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 Food Committee and Residents' Council as well, 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 with 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 (HQP) 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:

Ontario Health is a provincial agency that oversees health care quality. The role of Ontario Health includes, but is not limited to measuring and reporting on how the health system is performing, overseeing the delivery and quality of clinical care services, and setting quality standards and developing evidence-based guidelines to improve clinical 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.

The **Ministry of Long-Term Care (MLTC)** is the provincial authority overseeing long-term care in Ontario.

PointClickCare (PCC) is the name of a cloud-based electronic health record system that Caressant Care uses.

Continuous Quality Improvement (CQI) Committee

Our designated QI lead is Alero Eyewuoma-Eke, Executive Director.

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 representative, other professionals as well as representatives 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 surveys, concerns or complaint review, 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 key to success.
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.

Brief Summary of Quality Improvement Initiatives fiscal year 2025:

Overview

Caressant Care Fergus is working to improve the lives of our residents and employee wellbeing. We continue to improve our move in process by creating a more detailed checklist to assist in guiding team members to make this move more pleasurable for our new residents and their families. This process is meant to be more inclusive, welcoming and supports increased communication.

We continue to support various student placements, educational opportunities and engage team members engagement and have a focus on supporting our residents and families with palliative care.

Access and Flow

Optimizing system capacity, timely access to care, and patient flow outcomes and the experience of care for residents is a priority. Caressant Care is working in partnership and across care sectors on initiatives to avoid emergency departments through innovative practices and by ensuring timely access to primary care providers.

Some of the other initiatives in place to reduce unnecessary transfers to hospital include partnerships with Homewood Health, team member huddles after each fall, on call Medical Director, imaging and diagnostics contracts, and increased education on resident safety.

Building and Environmental Improvements:

We continue to enhance our maintenance program and plan to undertake a comprehensive review of maintenance tasks in 2025 on our online software system to improve asset management, service and efficiency. Some environmental goals or improvements for 2025 include window replacement, and nursing station upgrades.

Clinical Programs:

New Clinical Roles: In 2025, we welcome two new clinical team members to the Corporate Operations team: Clinical Analyst and Clinical Educator. The Clinical Analyst role will focus on in-depth monitoring of

electronic health records and documentation while the Educator role will provide effective, in-person education to build the capacity of our nursing teams and enhance the resident care experience.

InterRAI: The new Resident Assessment Instrument (interRAI), replacing RAI MDS 2.0, is being adopted across Ontario. All 15 Caressant Care homes were selected for the first pilot group of 50 Homes in the province, positioning us at the forefront of this transition. This initiative provides us with increased support and the opportunity to offer feedback to the MLTC, CIHI, and PCC. The interRAI is a more streamlined assessment tool, and PCC has optimized their software for user-friendly and efficient coding and submissions, showcasing our organization's knowledge, flexibility, and leadership in the sector.

Communication and Technology:

Online Learning Management and Policies: Caressant Care utilizes an online software system that houses our policies, procedures and our online learning management system. This provides quick access for all team members, is environmentally friendly, with a nimble turnaround time when changes are required. We continue to review and update policies and education and add extensive resources to our library such as "how-to's" and other relevant information.

Electronic Health Records: In 2025, Caressant Care will utilize an application designed by PointClickCare. The companion application to the electronic health record system has been designed specifically for handheld devices. The companion application will connect directly to our electronic documentation system and should promote efficiency, eliminate paper forms, and streamline data flow, which should enable and result in direct care team members spending more time with and providing care to residents in the home.

We continue to revise and adjust our electronic health record system for improvements, for example, providing new improved assessments into the care plan library.

Communication: 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 continue to enhance our use of virtual technology and software to participate in Communities of Practice both internally within Caressant Care and externally with our community partners.

Improving Efficiencies: We plan to start using high-speed scanners which go directly to the pharmacy in Q.2 for processing prescription orders. This should expedite the ordering process, decrease opportunities for errors and additionally promotes residents' confidentiality.

Equity and Indigenous Health

Caressant Care is committed to providing improved and equitable access, experiences and 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 team members and management will complete cultural awareness and safety education modules which includes Indigenous Relationship and Cultural Awareness courses and diversity education

modules. There is a plan to further enhance services and provide further initiatives in these areas on a broader scale.

Additionally, we have a Cultural Competency, Diversity and Inclusion Plan that is reviewed with actions annually and an Accessibility Plan that addresses and includes any identified barriers on an ongoing basis.

Infection Control:

Caressant Care recognizes the vital link between infection control practices and resident safety. We are continuously enhancing our infection control processes through increased auditing in areas such as hand hygiene, passive screening, PPE usage, and dietary and housekeeping procedures.

We have a dedicated Infection Prevention and Control (IPAC) Lead who supports the home by providing training, education, policy development, and outbreak management. To further optimize our IPAC practices, we carefully review trends and analyze data. Our IPAC Leads receive additional education, training, and participate in community of practice sessions to stay updated and effective.

Leadership Development

Caressant Care recognizes the impact of our leadership team on overall operations and health human resources management and have partnered with a Professional Certified Leadership Coach to continue to provide support 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.

Additionally, in 2025 we are conducting a complete overall review of our performance appraisal system, with a goal to streamline team member reviews and introduce efficiencies and enhancements to improve the experience for both managers and team members.

Resident and Family Experience:

Relationship Focus

Our culture statement is “Caring families, yours and ours together.” In 2025, we will continue to focus on improving resident and family relationships from the move-in process onward by adopting a relationship-based approach that aligns with and strengthens our culture statement. We will conduct an in-depth review of information packages and perform observational audits with corporate support to enhance the move-in experience. Our goal is to empower our team and families with the tools to build trust and respect as partners in care.

To support this priority initiative, we have partnered with an external consultant to enhance our processes. Our aim is for team members to improve communication, provide personalized care, and offer emotional support for overall well-being. This will enable team members to confidently engage with residents and families, resolve conflicts, and build strong partnerships.

Listening to our Residents and Families

Surveys are conducted throughout the year and summarized semi-annually. The results are carefully reviewed, facilitating timely improvement initiatives. This process also ensures a quick turnaround for any actionable items.

Based on feedback from residents and family members, we have made minor revisions to our 2025 surveys. These revisions include increased opportunities for participation through paper forms, QR codes, online links, and support or assistance via in-person or telephone options. Additionally, we have added an option to provide more detailed information for each category. Communication book was introduced for passionate family members to address concerns when management are not available.

Please see attached Resident and Family Experience Survey Summary and Action Plan

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, and team member experience by providing education incentives, development opportunities and carefully reviewing and listening to our team members. We conduct an annual Team Member Experience Survey and carefully review survey results and create an action plan to focus on any indicated areas.

Social Committee: A Social Committee was established for team member wellness. The duty of this committee is to organize events and occasions for team members' well-being and appreciation. For example, this committee sold raffle tickets and used the funds to buy cards and gifts for the team members during the holiday season.

Team Members: The Management Team organized a Holiday Party for team members, and this was well attended and enjoyed by all team members with music, presents, and food. Other celebrations to demonstrate our appreciation for team members include events such as Nurses' Week.

A Fall Fair event was coordinated by the Activity Coordinator and Food and Nutrition Manager for both residents and team members with games, music and food.

Based on residents' suggestions, new team members are featured in our monthly newsletter to introduce them to residents, other team members and family members.

Bi-monthly Town Hall meetings are held to provide information and updates and give team members an opportunity to bring concerns, suggestions and complaints for all departmental leads to address.

Safety

Caressant Care continues to conduct a comprehensive review of the Health and Safety Program with an expanded role at corporate office including internal health and safety policies and development of policies, programs and education aimed at enhancing health and safety compliance and accident reduction as well as promoting a culture of safety.

We have partnered with external partners for education and training such as Homewood Health for behavioural support, who provide a consultant for team member certification for Gentle Persuasive Approaches, and Wellington County Fire department to train in the use of fire extinguishers.

Additionally, some other strategies to promote safety include the Home's Medical Director proactively monitoring excess use of medication and suggesting non-pharmaceutical ways to redirect residents with responsive behaviours and we have also introduced Montessori Circles to redirect and engage residents.

Purposeful rounding is put in place after a resident fall to try to mitigate future falls and we have created a fall emergency bag, intended to facilitate a fast response and be more efficient when a resident falls.

Palliative Care

Caressant Care endeavours to provide high-quality palliative care. We have an interprofessional committee that meets bimonthly throughout the year where palliative care, pain, trends, success, and concerns are discussed. Our palliative care program strives to help the resident and their family/caregiver to: address physical, psychological, social, spiritual, and practical issues, and their associated expectations needs, hopes, and fears; prepare for and manage end of life choices and the dying process; cope with loss and grief; treat all active issues and prevent new issues from occurring; and promote opportunities for meaningful and valuable experiences, and personal and spiritual growth.

The goals of our program include but are not limited to, relieve suffering for residents and family members, improve quality of life during illness and death, provide a dignified death for residents, provide support and resources to residents, team members and families, develop and evaluate individualized care plans to ensure specialized care needs are met and consider physical, emotional, psychological, social, cultural, and spiritual needs.

Education is provided to all nursing team members on orientation and annually regarding palliative care and end of life. People with a serious illness have their palliative care needs identified early through a comprehensive and holistic assessment with timely access to support. Goals-of-Care Discussions are in place with consent and Advance Care Planning.

We have three indicators related to palliative care/end of life as part of our performance measurement and management program that are documented and monitored monthly.

Additionally, at Caressant Care Fergus we have created a wall tree, which we used to remember residents who have passed, making a quilt from team members uniforms to cover the resident as they leave the home during our service of farewell.

Other ideas are implementing a message in a bottle; when a resident is palliative, the social worker will meet with the resident and write a message to be given to their loved ones after they have passed.

When a resident is palliative, loved ones are invited to the home to help guide them on the palliative journey, what to expect with an opportunity to provide what they wish to see during the palliative process.

Population Health Management/Community Partnerships

As part of our Caressant Care strategic planning process data and information was gathered regarding Ontario's population for health and social needs. These insights helped to inform the design of our strategic and operational plans for initiative-taking, person-centred, cost-effective, equitable, and efficient solutions with the goal of improving the health needs of current and future residents while reviewing current and future trends regarding care and well-being. Opportunities for various community and business partnerships were identified and included in these plans.

Some of our partnerships, include Homewood Health to provide training for all team members. The topics vary and is based on what is relevant at the time or behaviours our residents are exhibiting and in areas where team members may need further education. Some examples include: DementiAbility training, GPA, dementia and sexuality, refusing care, types of dementia and alcohol induced dementia.

We have PREP LTC students from different countries working in our home, which we hope to hire after completion of the CNO registration examination. As well, our home nominated 3 PSWs for the Ontario Nominee Immigration Program to help in reducing the burden of PSW shortage. We continue with PSW students on their final placement and have had a SPEP student and a dietary student placement in our home.

Resident-Centred Care

We continue to promote our resident-centred philosophy with a continued focus on language in 2025. 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.

Attachments:

Resident and Family Experience Survey Summary and Action Plans 2025
QIP Information Workplan 2025

Resident Experience Survey Summary and Action Plan

Date:
Jan/27/2025

Number of Participants:
38

Top 3 Successes:
1. I get the Health Services that I need – 95 %
2. I can Participate in meaningful activities I wish to – 89%
3. Incontinence products supplied by the home meet my needs – 89 %

Top 3 Areas of Improvement:	Plan:	Responsible Person(s):	Date:
1. Team members know the story of my life if I want them to- 55.24%	<ul style="list-style-type: none"> Updating the "All about me" and placed it in the residents' rooms with resident's permission. Feature a resident in our monthly newsletter. Recreation and Leisure assessment has been upgraded to include residents past history. Implement more resident and staff programming. We implement an interactive power point where questions are posted and staff tries to guess who the resident is. 	AC/All Manager	-April 2025
2. I have the freedom to come and go when I wish to- 60.53%	<p>Will create an emergency card for residents who are not verbal who like to go out for coffee.</p> <p>Encourage POA to participate in planned outings</p> <p>Introduce more outings for residents</p> <p>Take residents out for walks</p> <p>Reach out to community partners to volunteer their service to improve out back courtyard to improve resident outdoor experience.</p>	AC/All managers	July 2025
1. Team members ask how my needs can be met- 55.26%	<p>Review Residents' Bill of Right sat every team meeting.</p> <p>Remind team members to use person-centred approach to care.</p> <p>-ask if you need anything?</p> <p>-ask if I can help you?</p> <p>-ask how may I assist you?</p> <p>Encourage engaging conversation and relationship building</p>	All Managers	April 2025

Survey Feedback:

Shared with:	Date:	Comments:
Residents	Feb/14/2025	Residents are happy with the action plan shared.
Families	Feb/13/2025	No information
Team Members	Feb/20/2025	Team members should remember to introduce self when entering room. -When providing care, interact with residents. -Use the "All about me " in the resident room to start a conversation. -Ask Family members about residents past life, to be able to know more about residents. Attend recreation activities with residents -feature new team members in our monthly newsletter.
PAC	Jan/30/2024	Members were happy with the action plan and asked for it to be shared when completed.

All request for follow up are complete if applicable:

- Yes
- No

Family Experience Survey Summary and Action Plan

Date:
Jan/27/2025

Number of Participants:
0

Top 3 Successes:
Planning on starting Family Council by the end of 2025.

Top 3 Areas of Improvement:	Plan:	Responsible Person(s):	Date:
1. Introduction of Family Council and home will work to increase family participation for surveys	<ul style="list-style-type: none"> This will be done by providing QR Codes to family members via OneCall Posting QR codes at the front entrance to the home Print extra copies of the survey and placing them at the Nursing station, BOM office to provide to family members. Introducing during Care Conferences 	All Team Members	Ongoing until Dec/31/2025

Survey Feedback:

Shared with:	Date:	Comments:
Residents	NA	Due to lack of participation no results to share at this time.
Families	NA	
Team Members	NA	
Others (Please specify)		

All request for follow up are complete:

Yes
 No

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Experience Percentage of residents responding positively to: "Staff take time to have a friendly conversation with me?"	C	% / Residents	In-house survey / Jan - Dec 2025	68.00	75.00	We have recognized this as an area of improvement and want to work towards this goal to enhance the quality of our lives of our residents and to promote customer service excellence.	

Change Ideas

Change Idea #1 Engaging residents is important for residents' wellbeing. Residents are actively encouraged to participate in their care processes. Discussion and reminders at team member meetings with survey results reviewed with both team members and residents consistently to engage further improvement ideas.

Methods	Process measures	Target for process measure	Comments
Inhouse surveys are completed with the residents and families by the activity department and/or delegates monthly. These results are tabulated corporately and utilized by the home as quality indicators. Results are provided throughout the year to determine change percentages and will be discussed at the Quality Committee meetings. Discussion held and results reviewed with staff and residents to be a consistent topic to engage further improvement ideas.	percentage of resident responding positively to "Staff take time to have a friendly conversation" (most of the time or always).	Caressant Care Fergus will endeavour to achieve an increase of 6 % to total 75% by the end of 2025 for the percentage of residents responding positively (most of the time or always) to the survey question: "Staff take time to have a friendly conversation with me" .	