



# Quality Progress Report for 2024

Caressant Care Harriston

March 2025

Caressant Care Nursing and Retirement Homes Ltd.

## **Brief Summary of Quality Improvement Achievements fiscal year 2024:**

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

1. The sprinkler system has been installed and activated.
2. The Desk 2 Nurses Station has been replaced.
3. Resident room upgrades such as upgrading washrooms, painting, hallways and installing some PVC in residents' rooms.
4. One hopper room was converted into a linen closet for additional storage.
5. The home has implemented a palliative room for residents and family comfort during end-of-life care.
6. The dining room was updated to include a designated servery area.

### **Clinical Programs:**

New lifts: We replaced all our lifts in the first part of 2024. All lifts now include weigh scales to promote consistent weight review.

Focus on Electronic Health Record Consistency: In 2024, we conducted a thorough review of Resident Electronic Health Records (EHRs) to identify any gaps and standardize EHR utilization. Consistency in EHRs fosters trust with both those we care for and external stakeholders.

UDA Schedules Turned on: The implementation of automatic scheduling for User Defined Assessments (UDA) in PointClickCare has enhanced visibility of upcoming, due, and overdue Resident assessments. This system provides clear assignments for frontline nurses and allows for easy oversight by managers and the corporate operations team, thereby increasing compliance and streamlining performance management.

Care Plan Library: Caressant Care has developed a customized care plan library that incorporates resident-centered language. We have reduced the number of focuses to minimize overlap and established clear parameters for care plan content. This will result in shorter, more navigable care plans. The Kardex feature is now organized to provide pertinent care directions to frontline team members. This project also promotes increased incorporation of Resident preferences, enhancing individualized care.

### **Communication and Technology:**

Website Upgrade: In 2024, Caressant Care completed an extensive review and update to our website, promoting transparency, other enhancements and promoting a more user-friendly experience.

Infrastructure: In 2024 we continued to update and revise our infrastructure by updating WIFI and connections.

Accounting: We have streamlined and automated our accounts payable process for redundance and efficiencies when paying invoices.

Staff Schedule Care online timecards transitioning to electronic schedule potentially in 2025

Education: In 2024 the online learning management system was updated and reviewed to ensure required education modules are available and current.

We continued to implement our communication strategy with the purchase of more mobile devices and laptops, to promote efficiencies for our team members and to connect residents and people of importance to them virtually.

### **Compliance and Performance Improvement**

Accreditation: In 2024, we were awarded a 3-year accreditation in Person-Centred Long-Term Care Community, which is the highest award achievable through CARF Canada. This achievement is an indication of our dedication and commitment to improving the lives of our person served. Our home achieved an Accreditation Status that only 3% of organizations receive internationally, with no recommendations.

Internal Auditing Process: In 2023 Caressant Care began an extensive internal auditing process. In 2024 we experienced a Caressant Care Comprehensive Proactive Home Visit through the corporate operations team with subject matter experts doing a thorough review with several audits for every department. Corporate team members completed various audits to identify any gaps, and a corrective action plan was created with dates for implementation.

Roadmap to Success: our comprehensive, all-encompassing tool was revised in 2024 and edited to include additional areas to document performance monitoring to track and review all meetings, document performance indicators, complete program evaluations, complete analyses and tracking all emergency exercises.

### **Infection Control:**

Caressant Care recognizes the correlation between infection control practices and keeping our residents safe. Caressant Care has a dedicated IPAC lead. Monthly community of practice calls were implemented for networking and sharing resources.

A comprehensive review of Infection Prevention and Control (IPAC) policies was conducted in 2024 with input from a certified IPAC professional. We incorporated emerging best practices, including the updated Canadian Tuberculosis Standards and Public Health Ontario's recommendations on the screening and management of CPE (carbapenemase-producing Enterobacteriaceae), an emerging antibiotic-resistant organism in Canada . Additionally, we integrated COVID-19 protocols throughout the manual, moving away from COVID-specific processes to adapt to our 'new normal' in alignment with the most recent Ministry of Long-Term Care guidelines.

### **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 previously 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 in the Resident Satisfaction Survey, Some examples are below:

- ✓ Residents get the health services they need – 94 %
- ✓ Receive health services they need -94%
- ✓ Can express opinion freely -94%

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

- ✓ Loyalty Question – Would you recommend this organization to others? 100%
- ✓ Families feel team members engage in friendly conversation with residents – 94%
- ✓ Team members ask how needs can be met - 95%

Based on feedback received from residents and family members we revised our Satisfaction Survey process. In 2024 we 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.

***Please see attached Progress of Survey Actions 2024***

**Other Comments:**

Resident Centred- Philosophy: In 2024 we promoted our resident-centred philosophy with a focus on language. A brief review of language and examples of resident-centred care were provided and discussed at each meeting as well as other initiatives throughout the year.

**Progress Summary from our Quality Plan 2024**

**Attachments include:**

QIP Progress Report for 2024  
Progress of Survey Actions 2024

**Experience | Patient-centred | Custom Indicator**

	Last Year		This Year		
<b>Indicator #2</b>	<b>CB</b>	<b>75</b>	<b>100.00</b>	<b>--</b>	<b>NA</b>
Percentage of residents who respond positively to the statement "I can participate in meaningful activities if I wish to" (Caressant Care Harriston)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

**Change Idea #1**  Implemented  Not Implemented

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.

**Process measure**

- percentage positive responses to the statement "I can participate in meaningful activities if I wish to"

**Target for process measure**

- 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.

**Lessons Learned**

The changes made indicate our initiative was successful and we are happy with the results.

**Comment**

This initiative was successful as evidenced by exceeding our target and scoring 100%.

Indicator #1	Last Year		This Year		
	Increase overall team member/workforce engagement to support consistent quality resident care (Caressant Care Harriston)	<b>64.00</b> Performance (2024/25)	<b>70</b> Target (2024/25)	<b>51.00</b> Performance (2025/26)	<b>-20 %</b> Percentage Improvement (2025/26)

**Change Idea #1**  Implemented  Not Implemented

Increase staff engagement through open forum discussion at meetings, appreciation days and suggestions.

**Process measure**

- 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.

**Target for process measure**

- The home will aim to improve overall percentage of engagement by 6 % to 70 % through the team member satisfaction survey by December 31, 2024.

**Lessons Learned**

The goal of 70% was challenging to achieve due to turnover of staff.

Overall participation in the 2024 survey was significantly down over the previous year noting only 77 team members completed the survey this year before the deadline. This may be due slightly to turnover of staff. It is also relevant to note that over 20% of the team members participating in the survey are new employees with years of service under 1 year. There may also be some discrepancies due to turnover and temporary coverages through the management team in 2024. Now that the Management team is back to full complement, we plan to make team member satisfaction and engagement a primary focus in 2025.

**Comment**

We will continue with this QIP with a revised target to improve the overall percentage of engagement by 9 % to 60 % through the team member satisfaction survey by December 31, 2025.

## Progress of Survey Actions 2024

### Resident Survey

Focus and Score:	Date Implemented:	Outcome of the Actions	Role of Resident Council/Family Council/PAC and CQI:	Comments:
Food and Meals Resident Survey Enjoy Mealtime score for 2023 82%. We continue to encourage residents to attend food committee and/ or present their comments or suggestions directly to the FNM for further investigation.	Feb. 2024 and on going	Resident Survey Score 2024- 35%	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Shared Initiative Supported by Resident's Council/PAC and CQI	Our score in 2024 significantly decreased to 47%. One of the reason we decreased the survey result in this area is d/t the implementation of the New Meal Option. We continue to encouraged Resident and Families to bring forward any suggestions related to food and meal service. FNM continue to conduct the food committee meeting monthly to discuss any concerns and compliments.
Food and Meals Resident Survey Enjoy Mealtime score for 2023 82%. 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 committee.	Feb. 2024	Resident Survey Score 2024- 35%	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Shared Initiative Supported by Resident's Council/PAC and CQI	Our score in 2024 significantly decreased to 47%. One of the reason we decreased the survey result in this area is d/t the implementation of the New Meal Option. We continue to encouraged Resident and Families to bring forward any suggestions related to food and meal service. FNM continue to conduct the food committee meeting monthly to discuss any concerns and compliments.
Resident Focus Survey "can decide what to wear" score for 2023 82% This goes hand in hand with our homes “resident centered” focus for this year. 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) Encourage residents who are able to voice their choices to team members.	Feb. 2024 and on going	Resident Survey Score 2024-94%	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Shared Initiative Supported by Resident's Council/PAC and CQI	Noted improvement of 12% in this area. Will continue to 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) Encourage residents who are able to voice their choices to team members.

### Family Survey

Focus and Score:	Date Implemented :	Outcome of the Actions:	Role of Resident Council/Family Council/PAC and CQI:	Comments:
Variety in Meals Family Survey Score for 2023 72%. Continue to encourage family members to attend family council and/ or present their comments or suggestions directly to the FNM for further investigation. Explain revised menu plan to family council. Explain resident’s food committee to family members	Feb. 2024 and on going	Family Survey score 2024 (enjoy mealtimes) 90%	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Shared Initiative Supported by Resident's Council/PAC and CQI	This is a great improvement with an increase in satisfaction of 18%. We continue to encourage family members to attend family council and bring forward their comments and suggestions to the FNM and or management team.
Health and Wellness Family Survey Score for 2023-31%- (residents can explore new skills and interests)	Feb. 2024 and on going	Family Survey score 2024	<input checked="" type="checkbox"/> Shared Initiative	Great improvement in this area with an increase of 32%, we are happy with this result.

<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.</p> <p>Review the suggestions at CQI/PAC meeting where families and residents attend.</p>		(Participates in meaningful activities) 63%	<input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	Management team continues to work with Activation department to come up with new activities for residents.
<p>Resident Focus Family Survey Score for 2023 = 76% (care and support of family member)</p> <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>	Feb. 2024 and on going	Family Survey score 2024 ( Care and Support for family member) 100%	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	We are happy with the result of 100% .

**Communication of Results**

Who:	Date Shared:	Feedback/Comments:
Resident Council	March 10, 2025	
Family Council	March 26, 2025	
Team Members	March 5, 2025	
PAC/CQI	April 2025	
Others (please list)		

**Surveys were available for both families and residents to participate in throughout 2024. Surveys were available in hard or soft copy with links provided and were also posted in the home. Results were summarized in July 2024 (January-June participation) and January 2025 for overall review (January-December 2024 participation).**

**Feedback for survey content is solicited at Resident Council Meetings and from families throughout the year. We have revised our 2025 surveys based on feedback received.**