



Quality Progress Report for 2024

Caressant Care Marmora

March 2025

Caressant Care Nursing and Retirement Homes Ltd.

Brief Summary of Quality Improvement Achievements fiscal year 2024:

Building and Environmental Improvements:

In 2024 we made many improvements to the home including halls were painted, dining room sink, and cabinets replaced, resident rooms repaired and painted , Visitor Parking signs installed and outdoor lawn maintenance improvements.

Clinical Programs:

New equipment: We replaced all our lifts in the first part of 2024, including new Carendo multipurpose hygiene chairs. All lifts now include weigh scales to promote consistent weight review. Additionally, we replaced beds with replaced with Hi-Lo and/or bariatric beds and replaced bed alarms to be wireless.

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.

Team Newsletter: A quarterly newsletter dedicated to team member relevant information sharing. This is an opportunity to share pictures, upcoming events/activities, policy updates and team member celebrations.

One-Call: The home increased the use of One-Call Now in effort to maintain stronger communication with family and staff. This expanded to include invitations and posters to upcoming events, programs and bazaar.

Staff Schedule Care: With the implementation of SSC (Staff Schedule Care) virtual communication with team members has a far reach, improving communication. Team meetings, appreciation events and other specific communications are shared directly with SSC, an application all staff check.

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.

The student placement partnership with First Nations Technical Institute offers integrated indigenous and cultural programming for residents.

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:

- ✓ Enjoy mealtimes – 89 %
- ✓ Residents feel they have a voice and team members listen - 83%

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

- ✓ Team members respond appropriately when my family needs assistance - 100%
- ✓ Feel privacy is respected - 93%

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.

Special Events: Residents put together and participated in the Marmora Santa Claus Parade. Community members, families and team members cheered on residents and staff walking in the parade. Community response has been very positive.

Special Outings: Residents participated in a bus outing to the Quinte International Airshow celebrating 100 years of the Royal Canadian Air Force at the Air Base in Trenton.

Community Engagement: Marmora took part in the LTC Community Involvement with the MPP attending the Second Annual Fall Fair and the Mayor of Marmora, Ontario Health at Home Placement Coordinator visiting the home for a conversation with staff and managers sharing their experiences.

Team Building: Staff created teams and participated in the Goose Chase, completing fun tasks in this team building event. Team members showed great creativity and were celebrated with awards at the end of the games. Team member appreciation events included Years of Service Awards party, Women's Day Celebration and a Christmas party.

Progress Summary from our Quality Plan 2024

Attachments include:

QIP Progress Report for 2024

Progress of Survey Actions 2024

Experience | Patient-centred | Custom Indicator

Indicator #1	Last Year		This Year		
	Percentage of residents responding positively to: "Staff respond appropriately when I ask for assistance?" (Caressant Care Marmora)	70.00 Performance (2024/25)	75 Target (2024/25)	90.00 Performance (2025/26)	28.57 Percentage Improvement (2025/26)

Change Idea #1 Implemented Not Implemented

Discuss with residents and team members and solicit feedback for areas for improvement and how team members may help. Use Purposeful Rounding to best serve the resident.

Process measure

- Inhouse survey completed and tabulated corporately. Results will be provided mid-year to determine change percentages and discussed with the CQI Committee. This will be measured by the positive percentage of resident responses: Staff respond appropriately when I ask for assistance.

Target for process measure

- Survey results will increase by 5 % to 75 % by December 2024 results to the question: "Staff respond appropriately when I ask for assistance."

Lessons Learned

Survey response in the first half of the year was critical to review to determine if planned changes were effective. Throughout the year Resident Council feedback was also key in getting feedback as to the direction we were heading. Following up with education and sharing Person First Language change aided in a culture shift in the way staff address and respond to residents.

Comment

This quality initiative was successful as evidenced by 28.57 percentage improvement. We are happy with the results.

Indicator #2	Last Year		This Year		
Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences". (Caressant Care Marmora)	70.00	75	83.00	18.57	NA
	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 **Implemented** **Not Implemented**

Discuss at resident council and provide information to residents to ensure they are aware of rights and reporting protocols at move in and on an ongoing basis. Encourage resident representative to attend and further participate in QI/PAC meetings. Solicit change ideas from team members and residents for further improvement. Educate staff on Person First language.

Process measure

- Inhouse survey completed and tabulated corporately. Results will be provided mid-year to determine change percentages and discussed with the QI Committee. This will be measured by the positive percentage of resident responses: "I can express my opinion without fear of consequences."

Target for process measure

- Survey results will increase by 5 % to 75 % by December 2024 results measured by the positive percentage of resident responses: "I can express my opinion without fear of consequences."

Lessons Learned

Reviewing survey responses from the first half of the year was critical to get a sense of where the home stood and if changes made were effective.

Throughout the year Resident Council feedback was key in getting feedback as to the direction the home was heading.

Showing residents that their opinion matters through complaint action and follow up was made a priority through Complaint Process improvement throughout the year.

Following up with education and sharing Person First Language change aided in a culture shift in the way staff address and respond to residents.

Although residents chose not to participate in some Professional Advisory Committee meetings, invitations to attend demonstrates our ongoing commitment to encourage participation, collaboration and provide opportunities for feedback and input of the residents we serve.

Comment

This quality initiative was successful as evidenced by 18.57 percentage improvement. We are happy with the results.

Progress of Survey Actions 2024

Resident Survey

Focus and 2023 Score:	Date Implemented:	Outcome of the Actions:	Role of Resident Council/Family Council/PAC and CQI:	Comments:
This place feels like home to me (51%).	February 2024 and ongoing.	This indicator was not a repeated question on the 2024 survey. Questions relating to topics that make up a home like environment were exceedingly positive.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	<ul style="list-style-type: none"> Signage has been reduced Noise is kept to a minimum (less commotion at care station, paging in emergency only)
I can easily go outdoors if I want (48.39%)	February 2024 and ongoing	92% feedback was positive for resident's having easy access to go outdoors if they choose.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	<ul style="list-style-type: none"> ESM ensured outdoor spaces were cleared with added attention to safety measures. Walking programs with Restorative Care Activity Aides assisted with outdoor walks with more flexibility to meet resident interest in the moment. Walk way was redone to ensure safety while ambulating.
Staff respond quickly when I ask for assistance (67%).	May 2024 and ongoing.	89% feedback was positive for "staff respond appropriately when I ask for assistance".	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	<ul style="list-style-type: none"> Although call bell response remained a common Resident Council concern, staff education was complete and an improvement was reported as the year progressed. Purposeful rounding was made part of PSW education and this was shared with residents of what they can expect.

Family Survey

Focus and 2023 Score:	Date Implemented:	Outcome of the Actions:	Role of Resident Council/Family Council/PAC and CQI:	Comments:
My family member can have a bath or shower as often as he/she wants. (49.5%)	February 2024/ongoing	This indicator was not a repeated question on the 2024 survey. The most relatable question "my family member can have a bath or shower at time they have chosen" does not support an improvement in terms of autonomy related to bathing, despite efforts to improve.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	<ul style="list-style-type: none"> Bath/shower schedule was revamped and updated. Bath bingo was initiated in attempt to increase communication from PSW to registered staff. Also including the reschedule for missed baths. Residents were surveyed to ensure their preference is what is indicated in their care plan.
My family member participates in meaningful activities. (25%)	February 2024 and ongoing	63% responded positively, which demonstrates an improvement. Important to note is 21% indicated "unable to answer".	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	<ul style="list-style-type: none"> Programs calendar discussed at resident council meetings to receive direct input from residents Recreation assessment was recreated and Life Enrichment Coordinator attends care conference and move-in meetings to gather information on resident preferences.
It is easy for my family member to make friends here. (49%)	March 2024 and ongoing	70% responded positively, though the question was changed to "my family member has people to spend time with him/her if they wish".	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	<ul style="list-style-type: none"> Residents are introduced to roommate and table mate on move-in. Residents have the opportunity to express interest in table seating with residents of similar interest and is accommodated as possible.

Communication of Results

Who:	Date Shared:	Feedback/Comments:
Resident Council	February 10, 2025	
Family Council	NA	No family council in place at this time. Information will be added to agenda for next family council offering.
Team Members	February 10, 2025	QIP meeting
PAC/CQI	April 24, 2025	Will be shared during next PAC on April 24, as results not ready for January PAC meeting.

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.