



Caressant Care
Nursing and Retirement
Homes Limited

Quality Progress Report 2025

Caressant Care on Bonnie Place

March 2026

Brief Summary of Quality Improvement Achievements fiscal year 2025:

Environmental & Infrastructure Improvements:

In 2025 Bonnie Place continued with painting the home and updating resident rooms. The home had a new makeup air unit installed to promote improved air circulation in the home.

Clinical Programs:

Care Plan Library: Caressant Care has developed and continues to update our customized care plan library to further promote our philosophy resident-centred language. We have reduced the number of focuses to minimize overlap and established clear parameters for care plan content.

In 2025 Bonnie Place enrolled in a pilot project in collaboration with CareRx pharmacy and Libre View. This project allows the interdisciplinary team to review resident blood glucose results around the clock. These sensors provide continuous monitoring and up to date data on trends in residents' glucose levels. This monitoring supports recommendations to improve blood glucose control for residents with diabetes mellitus.

Technology and Innovation:

InterRAI Pilot: The Resident Assessment Instrument (interRAI), replacing RAI MDS 2.0, will be adopted across Ontario by April 2026. Our home was selected for the first pilot group of 50 Homes in the province, positioning us at the forefront of this transition. This initiative provided us with increased support and the opportunity to offer feedback to the Ministry of Long-Term Care (MLTC), Canadian Institute for Health Information (CIHI), and PointClickCare (PCC). The interRAI is a more streamlined assessment tool, and (PCC) has optimized their software for user-friendly and efficient coding and submissions, demonstrating our organization's knowledge, flexibility, and leadership in the sector.

In 2025, Caressant Care began utilizing an application designed by PointClickCare. The companion application to the electronic health record system has been designed specifically for handheld devices. The companion application connects directly to our electronic documentation system and promotes efficiency, eliminates paper forms, and streamlines data flow, which enables and results in direct care team members spending more time with and providing care to residents in the home.

Education: In 2025 the online learning management system was updated and reviewed to ensure required education modules are available and current.

We continued to enhance our technology with more mobile devices and laptops, promoting efficiencies for our team members with enhanced security updates.

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. In 2025 we continued to maintain accreditation standards and work towards our next surveys to be scheduled in 2027.

Internal Auditing Process: In 2025 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 2025 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 Prevention & Control (IPAC):

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

A comprehensive review of Infection Prevention and Control (IPAC) policies was conducted in 2025 input incorporating emerging best practices, with updated guidelines.

We have automated some processes with regards to IPAC reporting, to reduce duplication, ensure better record maintenance and automated clinical IPAC audits.

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 team members completed cultural awareness and safety education modules which included Indigenous Cultural Safety in Health Care (Key Terms and Historical Context) and Diversity, Equity, and Inclusion in the Workplace (DEI).

Resident, Family, & Team Experience:

Surveys are completed throughout the year, and summarized semi-annually 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 – 100 %
- ✓ Residents feel privacy is respected – 100 %
- ✓ Residents would recommend 100%

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

- ✓ Loyalty Question – Would you recommend this organization to others? 100 %
- ✓ Residents enjoy mealtimes 100 %
- ✓ Families feel staff engage in friendly conversation with residents – 86 %

Please see attached Progress of Survey Actions 2025

Community Partnerships:

Community Engagement Day - Last year's event was a tremendous success, and we saw incredible engagement from our local communities. This province-wide initiative was a great opportunity to connect with our local community, advocate for our industry, and showcase our home with external partners and others.

Celebrating 50 Years of Care

Since 1975, Caressant Care has been dedicated to supporting families and enriching the lives of residents across Ontario. Last year we celebrated our 50th anniversary in September 2025. This is a testament to the trust our communities have placed in us and the unwavering dedication of our team members and volunteers. We were proud to mark this milestone by celebrating the people, both past and present, who have made Caressant Care what it is today.

Other Comments:

Resident Centred- Language: In 2025 we continued to promote 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.

Additionally, our Care Plan Library includes our Resident-centred words of choice (i.e. nurse vs. Registered Staff, team member vs. staff) to ensure care plans are clear, accessible, and meaningful to those receiving care.

Progress Summary from our Quality Plan 2025

Attachments will include:

QIP Progress Report for 2025

Progress of Survey Actions 2025

Access and Flow | Efficient | Optional Indicator

Indicator #1	Last Year		This Year		
	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)
Rate of ED visits for modified list of ambulatory care–sensitive conditions* per 100 long-term care residents. (Caressant Care Bonnie Place)	38.89	33.90	14.89	61.71%	NA

Change Idea #1 Implemented Not Implemented In Progress

1.Enhance staff training on early recognition and management of common conditions that may result in ED visits, such as infections and dehydration 2.Review use of SBAR Tool with home team to improve communication with NP and physician before transfers . Educate staff on effective communication techniques between members of the health care team and external clinical supports about a resident’s condition 3.Work collaboratively with clinical supports, such as on-site nurse practitioners, and physicians to deliver education, training, and clinical guidance to home team and participate in decisions to transfer a resident to a hospital.

Process measure

- ED Data Transfer template data to be reviewed monthly to determine if interventions have shown positive change. Review of education completion as indicated. Data will also be shared during our Town Hall Meetings, Resident Council and CQI Meetings.

Target for process measure

- The home will endeavour to decrease the percentage of potential avoidable emergency department hospital transfers by 5 %, from 38.9% to 33.9% by December 31, 2025.

Lessons Learned

We feel the initiatives put in place led to great success by exceeding our target by over 50 % with a 62 % percentage improvement.

Comment

We are proud of our achievement and will continue to work towards reducing emergency department admissions.

Progress of Survey Actions 2025

Resident Survey

Actions Taken (Need to enter previous score and list each action):	Date Implemented:	Outcome of the Actions (Need to enter the new score/result):	Role of Resident Council/Family Council/PAC and CQI:	Comments or Feedback (need to enter the result with why it was/wasn't achieved):
I enjoy meal times. (73.3%)	March to December 2025	2025 results 80% this is a slight increase from last year.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The home was able to install speakers in the dining room so that music could be played during meal times based on resident preference. Seating plans were also reviewed to try and sit residents with common interests together.
I'm bothered by the noise here. (45%)	March to December 2025	2025 results is 51% this is slightly worse compared to last year.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	This goal was not met challenges may have been related to some changes in the management team during 2025.
Food served at the right temperature (73.33%)	March to December 2025	2025 results are 83%	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	Over the past year the guidelines for temperature of soup that could be served was increased and this was related to residents satisfaction.

Family Survey

Actions Taken (Need to enter previous score and list each action):	Date Implemented:	Outcome of the Actions (Need to enter the new score/result):	Role of Resident Council/Family Council/PAC and CQI:	Comments or Feedback (need to enter the result with why it was/wasn't achieved):
Goal was to increase survey participation for 2025	March to December	There was a slight increase with a total of 7 participants.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	Home will continue to strive for increased survey participation in 2026. QR code made available to families. Notification to be sent via One call to encourage participation.
			<input type="checkbox"/> Shared Initiative <input type="checkbox"/> Supported by Resident's Council/PAC and CQI	
			<input type="checkbox"/> Shared Initiative <input type="checkbox"/> Supported by Resident's Council/PAC and CQI	

Communication of Results

Who:	Date Shared:	Feedback/Comments:
Resident Council	TBD	
Family Council	TBD	
Team Members	March 12, 26	
PAC/CQI	April 28th 2026	
Others (please list)		

Surveys were available for both families and residents to participate in throughout 2025. Surveys were available in hard or soft copy with links provided and were also posted in the home. Results were summarized in July 2025 (January-June participation) and January 2026 for overall review (January-December 2025 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.