



**Caressant Care**  
Nursing and Retirement  
Homes Limited

# Quality Progress Report 2025

**Caressant Care Courtland**

**March 2026**

## **Brief Summary of Quality Improvement Achievements fiscal year 2025:**

### **Environmental & Infrastructure Improvements:**

In 2025 Caressant Care Courtland completed our sprinkler project and now the entire home is equipped with sprinklers. Our Nursing Care Centre was renovated to provide our Nursing team with an improved workspace that is more than double the size their previous space. The home purchased several new chairs for residents' rooms and lounge chairs for our library and sitting room. The home installed a gazebo equipped with screens on our memory garden deck to allow for a sheltered place when enjoying the outdoors. New boilers were installed that will be more efficient in heating the home and hot water.

### **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.

### **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.

This year we started using SSC to streamline the way team members sign in/out for their shift. This practice has positively impacted payroll practices.

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 feel they are treated with respect by staff 100%
- ✓ Residents feel the quality of the food served is sufficient and they get enough to eat – 100 %

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

- ✓ Loyalty Question – Would you recommend this organization to others? 91%
- ✓ Families feel residents' privacy is respected – 100%

Caressant Care Courtland has had success with hiring and retention through student placements. Over the past year we have organized more team member events such as Subway lunch, walking Tacos and Frosty day.

**Please see attached Progress of Survey Actions 2025** (from Roadmap – please ensure complete)

**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.

**Community Partners**

In 2025 we partnered with the Nurse Led Outreach Team (NLOT) to assist with education for front line team members. We continue to work closely with the external Behavioural Supports Ontario (BSO) team to support our residents. We are proud to continue to partner with local colleges and we were able to support over 100 PSW students complete the placement portion of their program in our home. Seven PSWs were able to complete preceptor training through Ontario Centres for Learning, Research and Innovation in Long-Term Care (Ontario CLRI) this supports our PSWs to be positive mentors for students and new team members.

**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

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

Indicator #1	Last Year		This Year		
	Performance (2025/26)	Target (2025/26)	Performance (2026/27)	Percentage Improvement (2026/27)	Target (2026/27)
<b>Resident Experience</b> Percentage of residents responding positively (most of the time/always) to: "I am able to decide the time I go to bed at night?" (Caressant Care Courtland)	CB	50	100.00	--	NA

**Change Idea #1**  Implemented  Not Implemented  In Progress

Review resident preferences regarding the time they like to go to bed with residents at care conference. Update care plans to reflect preferences and communicate to team members any changes.

**Process measure**

- In house survey completed and tabulated corporately. Results will be provided midyear to determine change percentages and discussed with the CQI/PAC Committee. This will be measured by the percentage of residents who respond with most of the time or always to the question "I decide the time I go to bed at night".

**Target for process measure**

- Overall percentage score of residents responding positively to "I decide when to go to bed" will be at least 50 % by December 31, 2025.

**Lessons Learned**

After a complete review of all Residents' care plans and ensuring resident preference aligned with care plans we were able to support Residents' choices on when they preferred to go to bed and meet our goal.

**Comment**

We are pleased with our achievement for this QIP.

## 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):
There are meaningful activities to do here in the evening if I wish to. 45% 2024 results	March to December 2025	2025 results are 80% almost double the previous year.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	Improvement to staffing hours for activity aide supported result.
I can have a bath or shower at times that I have picked. 45% 2024 results	March to December 2025	2025 results are 55% 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	Review of Residents preference for bathing may have contributed to slight overall rise in satisfaction.
I can decide when to get up in the morning and when to go to bed 45% 2024 results	March to December 2025	In 2025 this question was two separate questions in the survey – 2025 results for choosing when to get up was 68% and I decide what time to go to bed was 100% overall results in both categories have increased.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The success related to when to go to bed may have been supported by an increase in PSW hours on the evening and night shift.

### 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):
My family member has time to do things in the evening and weekend in they wish. 40% 2024 results	March to December 2026	2025 results are 50% this is a slight increase	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	This is related to increase in hours for the activity aid.
My family members privacy is respected. 60% 2024 results	March to December 2026	2025 results 90% this is a significant increase.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	Ongoing reminders to team members in 2025 regarding ensuring curtains are drawn and doors closed when providing care contributed to the success.
My family member is able to get help when he/she needs it. 60% 2024 results	March to December 2026	2025 results 82% this is a significant increase.	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	Overall improvement with consistent staffing and addition of one evening and night PSW likely positively impacted this result.

### Communication of Results

Who:	Date Shared:	Feedback/Comments:
Resident Council	March 31, 2026	
Family Council	NA	Information about survey results shared in April Newsletter.
Team Members	March 11, 2026	
PAC/CQI	April 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 revised our 2025 surveys based on feedback received.