



Caressant Care
Nursing and Retirement
Homes Limited



Quality Progress Report 2025

Caressant Care Fergus

March 2026

Brief Summary of Quality Improvement Achievements fiscal year 2025:

Environmental & Infrastructure Improvements:

- Installation of sprinkler system in the home
- Renovation of North Spa Room
- New Air conditioner in Small Dining room.
- Replacement of Air conditioning for resident rooms.

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.

Clinical Equipment: This year we purchased a bladder scanner, replaced all stethoscopes and blood pressure machines and all resident slings.

Technology and Innovation:

InterRAI LTCF 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. In addition to this we also provided education some examples are related to responsive behaviours, redirection techniques, Pick's Disease, Gentle Persuasive Approaches, and a DementiAbility Workshop.

We continue to enhance our technology with more mobile devices, phones, 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 Experience Survey, Some examples are below:

- ✓ Team members engage in friendly conversation – 86 %
- ✓ Residents would recommend us 85 %
- ✓ Residents feel they get the health services they need – 81 %

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.

We have connected with Hospice Wellington for palliative resident support.

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.

Our Annual Fall Fair was a huge success, government representatives and members of the Fergus community attended. We hosted a Hobby Farm with exotic animals, which was enjoyed by all.

We celebrated our team members by hosting several appreciation and recognition events, such as breakfast, pizza lunches, departmental week, service awards, retirement, and various holiday celebrations.

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)
Resident Experience Percentage of residents responding positively to: "Staff take time to have a friendly conversation with me?" (Caressant Care Fergus)	68.00	75	86.00	--	NA

Change Idea #1 Implemented Not Implemented In Progress

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.

Process measure

- percentage of resident responding positively to "Staff take time to have a friendly conversation" (most of the time or always).

Target for process measure

- 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" .

Lessons Learned

Target was exceeded.

Comment

We are pleased with the success of 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):
1. Team members know the story of my life if I want them to-55.25%	Mar/31/2025	1. Team members know the story of my life if I want them to- 77 %	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	1. This outcome was achieved due staff being reminded daily to introduce and have conversation with residents, using "the all about me" as a conversation starter.
1. I have the freedom to come in and go if I wish to 60.55%	Mar/31/2025	1. I have the freedom to come in and go if I wish to- 63.88%	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	2. This action was achieved but we could do better, residents would like to see more outings.
1. Team members ask how my needs can be met- 55.26%	Mar/31/2025	1. Team members asked how my needs can be met- 83 .34%	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	3. This outcome was achieved because team members continuously asked residents if they need anything else before leaving them.

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):
We did not have enough results for data to compare.			<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	
			<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	June/15/2025	Residents said there has been great improvement in staff friendliness and are more open to having conversation
Family Council	NA	Survey was posted and share during care conferences, No comment was received from families.
Team Members	June/14/2025 October/4 th /2025	Team members were happy they had the opportunity to join residents in the annual fall fair. Staff said they now use the all about me to start conversation with residents
PAC/CQI	July/31/2025	No comment from PAC. All was impressed about the progress so far.
Others (please list)	October/15/2025	Posted in the staff room

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.