



**Caressant Care**  
Nursing and Retirement  
Homes Limited

# Quality Progress Report 2025

**Caressant Care Woodstock**

**March 2026**

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

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

1. Some windows were replaced
2. Upgraded paint in residents' rooms and common areas
3. Upgraded some lighting with LED
4. Upgraded water heaters to on demand

### **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 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.

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 incontinence products meet needs 99%
- ✓ Residents feel they get health services needed 96%
- ✓ Loyalty Question - would recommend this organization to others? 95%
- ✓ Residents feel their privacy is respected 91%

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 – 100%
- ✓ Families feel privacy is respected 100%

**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.

Nurse Led Outreach: Introduced the Caressant Care Nursing Team to NLOT. The team at NLOT promotes reduction in unnecessary transfers to hospital and improves Nursing skills and judgement through continued education and 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.

## **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**

	Last Year		This Year		
<b>Indicator #1</b>	<b>69.00</b>	<b>75</b>	<b>87.00</b>	<b>--</b>	<b>NA</b>
Resident Experience	Performance	Target	Performance	Percentage Improvement	Target
Percentage of residents responding positively (most of the time/always) to: "team members engage in friendly conversation" . (Caressant Care Woodstock)	(2025/26)	(2025/26)	(2026/27)	(2026/27)	(2026/27)

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

1) discuss findings of survey with team members during Town Halls Meetings 2) Remind team members in huddles and at team members meetings to ensure they are involving resident in conversations during care periods and whenever able 3) Remind team members during downtime spending 1:1 time with residents and engaging in friendly conversation

**Process measure**

- percentage of residents responding positively to team member engagement question on survey

**Target for process measure**

- Caressant Care Woodstock will endeavour to increase the percentage of residents responding positively (most of the time/always) by 6 % to 75 % to the survey question "team members engage in friendly conversation" by December 31st, 2025.

**Lessons Learned**

- Staff members require reminders in dining rooms to ensure they are engaging in conversation with residents.
- Promote consistent touch points with residents at all times to ensure their needs are being met.
- Review and utilize nonpharmacological interventions for residents in distress.

**Comment**

We are pleased with our results and exceeding our target 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):
Team members engage in friendly conversation 2024 Score 69% <ul style="list-style-type: none"> <li>Promote staff to resident engagement during team meetings and townhalls</li> <li>Staff engage in conversation with residents when providing assistance in the dining room and passing by in hallways and lounges</li> <li>Staff to introduce themselves and explain care being provided</li> </ul>	March 2025-December 2025	2025 Score 87% Results improved significantly by 18 % from previous year	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The quality initiative was successful as evidenced by the percentage improvement.  We are happy with the results
Team members ask how needs can be met 2024 Score 76% <ul style="list-style-type: none"> <li>Promote staff to resident engagement during team meetings and townhalls</li> <li>Staff to ask resident how they can meet their care need while responding to call bells and resident inquiries</li> <li>Gather resident feedback through resident council and adjust care plans accordingly</li> </ul>	March 2025-December 2025	2025 Score 81% Results improved by 5% from previous year	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The quality initiative was successful as evidenced by the percentage improvement.  We are happy with the results
Enjoy Mealtimes 2024 Score 76% <ul style="list-style-type: none"> <li>Audit meal service and gather resident feedback</li> <li>Sample resident meals and provide feedback to cooks</li> <li>Monitor meal temperatures during meal preparation</li> </ul>	March 2025-December 2025	2025 Score 87% Results improved significantly by 11% from previous year	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The quality initiative was successful as evidenced by the percentage improvement.  We are happy with the results

### 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):
Participates in meaningful activities 2024 Score 78% <ul style="list-style-type: none"> <li>Review program calendars at end of each month for successful programs, remove those that were not successful</li> <li>Gather feedback and suggestions from residents at monthly Resident Council meetings</li> <li>Complete program audits</li> </ul>	March 2025-December 2025	2025 Score 83% Results improved by 5% from previous year	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The quality initiative was successful as evidenced by the percentage improvement.  We are happy with the results
Team members ask how needs can be met 2024 Score 93% <ul style="list-style-type: none"> <li>Promote staff to resident engagement during team meetings and townhalls</li> <li>Staff to ask residents how they can meet their care needs while responding to call bells and resident inquiries</li> <li>Staff to introduce themselves to residents and explain care being provided</li> <li>Gather resident feedback through resident council and adjust care plans accordingly</li> </ul>	March 2025-December 2025	2025 Score 91% Results decreased by 2% from previous year	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The quality initiative was unsuccessful as evidence by the percentage decline.  We continued goal is to improve overall family satisfaction.  We continue to work to achieve our goal of improving this quality initiative in 2026
Can shower and bathe at chosen time 2024 Score 93% <ul style="list-style-type: none"> <li>Each resident will be asked upon admission what their preferred time is for bathing or showering</li> <li>Adjust bath schedule as needed to accommodate resident preference</li> </ul>	March 2025-December 2025	2025 Score 78% Results decreased significantly by 15% from previous year	<input checked="" type="checkbox"/> Shared Initiative <input checked="" type="checkbox"/> Supported by Resident's Council/PAC and CQI	The quality initiative was unsuccessful as evidence by the percentage decline.  We continued goal is to improve overall family satisfaction.

**Communication of Results**

<b>Who:</b>	<b>Date Shared:</b>	<b>Feedback/Comments:</b>
Resident Council	March 5, 2026	Shared during resident council meeting and posted on Quality board
Family Council	March 5, 2026	Posted on Quality board
Team Members	March 5, 2026	Posted on Quality board
PAC/CQI		
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.**