

Continuous Quality Improvement Initiative Report December 2024

Designated Lead

Fola Akano, Senior Administrator Long-Term Care

2023 - 2024 Quality Improvements

Please see attached 2023 - 2024 QIP Progress Report that identifies the actions implemented based on the results of the 2022 Resident Satisfaction Survey, including timelines and outcomes. Overall improvements were achieved in the areas of personal care, safety and comfort. Efforts continue to create a culture of resident-centered care.

2024 - 2025 Quality Priorities

Please see attached 2024 - 2025 Quality Improvement Plan (QIP) that focuses on providing a mealtime experience for residents that incorporates a person-centered approach to dining. The priority addressed in the attached QIP was identified by the Continuous Quality Improvement Committee (CQIC) based on feedback received via the 2023 Resident Satisfaction Survey.

The QIP outlines the processes for measuring progress and implementing adjustments as needed throughout the year. Progress and adjustments will be reported to the CQIC at their quarterly meetings.

In addition to focusing on the above quality priority in 2024, Radiant Care recently completed an accreditation survey with CARF International to evaluate how well we meet international standards for quality. As part of the process to prepare for the survey, a review and refinement of all policies and procedures was completed within the home to ensure that the highest standards are being met, maintained and updated in accordance with legislation. Radiant Care's long-term care homes earned a Three-Year CARF accreditation, effective September 24, 2024 to September 30, 2027. Radiant Care's accreditation survey report identified no recommendations, an accomplishment achieved by only 3% of CARF organizations!

2023 Resident Satisfaction Survey

The survey was distributed on November 1, 2023 to be completed and submitted by November 15, 2023. An article was included in the November 2023 resident newsletter re timelines. Hard copies of the newsletters were provided to all residents with copies emailed to resident contacts (family members, Substitute Decision Makers, etc.).

Please see collated survey results for 2023 attached.

- A copy of the results was distributed to supervisory staff on January 15, 2024.
- Hard copies of the results were handed out and discussed with residents at the February 7, 2024 Residents Council meeting.
- A copy of the survey results were posted in the Resident Resource Binder on March 14, 2023 and is available for review by all family members, caregivers and substitute decision makers (SDMs).
- Actions arising from the survey results as well as any future issues will be documented and shared with residents via Residents' Council and Food Committee meetings. Minutes for both committees will be included in the Resident Resource Binder and Food Committee Binder and are available for family members, caregivers and SDMs to review and will be shared at Family Council Meetings when the Council has been established. Regular updates are provided to staff via huddles.

For 2024, updates have been made to the Resident Experience Survey (formerly known as the Resident Satisfaction Survey). A new Family / Caregiver / Substitute Decision Maker (SDM) Survey has been created and will be distributed to applicable resident contacts to measure their experience with the home with respect to care, services, programs and goods provided at the home. The surveys will be distributed on November 1, 2024 with a deadline of November 15, 2024. Survey results will be tabulated and shared with residents, family members, caregivers, SDMs and staff, and actions taken for improvements will be documented. All nursing and personal care concerns have been addressed by the Director of Clinical Services.

Records of Improvements

The individuals who participated in evaluations of quality improvements are documented in the committee meetings noted below.

CQIC Committee

The LTC CQIC is responsible to:

- Assist the Quality Council in the performance of its mandate to support the Board's governance role for the quality of resident care and services.
- Assist the Quality Council in meeting the continuous quality improvement initiative requirements under Section 42 of the Fixing Long-Term Care Act (FLTCA), 2021.
- Perform the function of the Continuous Quality Improvement Committee under Section 166 of O. Reg 246/22.
- Perform the functions of the Quality Management System under the Commitment to Quality Policy.

CQIC Meetings were held as follows:

- October 24, 2023
- January 30, 2024
- May 14, 2024
- October 23, 2024

Food Committee

A Food Committee has been created with representation from both staff and residents and discuss any issues related to food as identified on the survey results, as well as any new concerns.

The Food Committee met on April 17, July 17 and September 18, 2024. Minutes are posted in a binder located at the Welcome Desk in Long-Term Care. Articles will be included in the monthly newsletter quarterly advising where the Food Committee Minutes binder is located, and that the information is available for residents, family members, caregivers, SDMs to review.

Residents' Council

The purpose of the Residents' Council is:

- To provide Residents with the opportunity to contribute to the operation of the Home.
- To establish a mechanism whereby Resident concerns are communicated to administration.
- To provide a forum for Residents to collaborate with community groups and volunteers concerning activities for the Residents.
- To allow Residents to play an important role in the organized daily life of the Home and all its activities with the Residents planning and contributing wherever possible. Encouraging an exchange of ideas, suggestions, and concerns regarding all aspects of care and activities in the Home.
- To ensure the rights, respect, dignity, and quality of life of residents at the centre are respected by facilitating regular communication among the residents and management team.
- To provide an opportunity to assist the administration and management team in providing better services and programs by offering suggestions, complaints, and recommendations.
- To promote friendship, tolerance and understanding.
- To provide and receive necessary information for the benefit of all residents.

Residents' Council Meetings were held as follows:

- October 23, 2023
- February 7, 2024
- May 17, 2024
- July 17, 2024

Minutes from the previous meeting were reviewed at the next meeting. Minutes were also posted in the Resident Resource Binder available for all residents, family, caregivers and SDMs to review.

Family Council

The purpose of the Family Council is to ensure an active, progressive and organized Family Council Committee is in place with mechanisms:

- To establish a mechanism whereby family members or a person of importance to a resident within the home are able and welcome to voice their suggestions, concerns and compliments are communicated to the administration.

- To provide a forum that provides an opportunity for involvement and participation by family members or a person of importance to a resident within the home to gather and collaborate to improve the quality of life and care for all residents of Radiant Care.
- That provide educational opportunities for family members and friends of Radiant Care Long-Term Care residents to learn and gain understanding of the home and how it operates.
- That provide a source of mutual support to all family members and friends of Radiant Care Long-Term Care residents.
- To inform and educate family members and friends of Radiant Care Long-Term Care residents.
- To advocate on behalf of all family members and friends of Radiant Care Long-Term Care residents.
- To ensure the rights, respect, dignity and quality of life of residents at the home are respected by facilitating regular communication among the council and management team.

Efforts continue to invite family members, caregivers, friends and SDMs to form the committee. Information sessions were held on August 21, 2024 at 2:00pm and on September 24, 2024 at 7:00pm. A slideshow was presented and provided an overview of what a Family Council is as well as:

- their purpose and goals
- what they do
- the benefits of a Family Council
- how to become a member
- contact information of the Therapeutic Recreation Supervisor

Additional information sessions will continue to be scheduled, convened semi-annually at a minimum, to advise family members, caregivers and SDMs re the importance to residents of the right to establish a Family Council. Articles will also be included in the monthly newsletter re same.

Communication with Staff

- Fact sheets were created in June 2023 for personal care expectations; copies included in 'Communication Binder' to staff to review on each shift.
- Expectations re daily routines were reviewed at regular unit meetings.
- An audit tool is in place and audits have been completed. Changes were communicated with staff and implemented in June 2023. Communication is ongoing as required to ensure a culture of quality care.
- A float resource position was added to reinforce routines and support new hires as well as current staff.

Training

- In-services to encourage staff to connect with residents in meaningful ways completed on April 13, April 17 and April 21, 2023.
- Additional orientation shifts for new hires as required.
- One-on-one training for lifts and transfers as well as follow-up training if required.

Reference: Continuous Quality Improvement Initiative Report, O. Reg. 246/22, Fixing Long-Term Care Act, 2021

Objectives	To increase resident satisfaction re: <ul style="list-style-type: none"> ▪ Personal care including bathing, hygiene, safety and comfort, lifting, transferring, etc. ▪ Staff providing care in a non-rushed manner while considering strengths, preferences and needs of resident allowing them optimal independence at their own pace 	
Measure/Indicator from 2023 - 2024 QIP	Percentage of residents responding positively (very satisfied and satisfied) to Questions 1 and 7 pertaining to personal care and receiving services in a non-rushed manner	
Current Performance as stated on 2023 - 2024 QIP	Question 1: 63% Question 7: 88%	
Target Performance as stated on 2023 - 2024 QIP	Question 1: 70% Question 7: 90%	
Final Performance - End of 2023	Question 1: 88% Question 7: 71% Overall improvements have been seen in the areas of personal care, safety and comfort. We continue to reinforce good hygiene, safety and comfort during transfers. These items have become a permanent item on the meeting minutes for the nursing department. We have been able to increase the number of permanent staff on the unit, therefore, we are using less contract/agency staff. We continue on with our goal of reinforcing our care requirements, creating a culture of resident centered care and educating in a purposeful way.	
QIP Progress		
Change Idea	Methods	Progress/Completion
Staff will use touch, smiling and eye contact to connect meaningfully with residents	<ul style="list-style-type: none"> ▪ Hold an in-service to train and encourage staff to connect with residents in these ways. ▪ Audits completed and changes made, if needed. 	<ul style="list-style-type: none"> ▪ In-service completed on April 13, 17, 21. ▪ This content will be included in all unit meetings. ▪ Plans for how to audit are in progress.
Education that requires staff sign-off and includes: <ul style="list-style-type: none"> ▪ personal care safe transfers - handle with care 	<ul style="list-style-type: none"> ▪ Hold in-services using video aids, fact sheets, one-on-one demonstrations and Q&A. ▪ Audits completed and changes made, if needed. 	<ul style="list-style-type: none"> ▪ Fact sheet created for personal care expectations - checklist format (introduced in a meeting, now in communication binder) June 6, 2023. ▪ Checklist fact sheet/tool is now used as an audit tool (plan in place for completing care audits) - one audit (6 residents) completed as of June 7, 2023.

	<ul style="list-style-type: none"> ▪ Create fact sheet for new and current staff and add to staff communication binder. 	<ul style="list-style-type: none"> ▪ Checklist/fact sheet tool has been created for safe transfers/handle with care - presented at a meeting. Will be referred to in all unit meetings and in the communication book for reminders. June 6, 2023
<p>Include float resource staff member to:</p> <ul style="list-style-type: none"> ▪ reinforce routines. ▪ support and trains new hires and agency staff advocate for resident care needs 	<ul style="list-style-type: none"> ▪ Additional orientation for new staff ▪ GPA Training for float resources ▪ Advocate for residents ▪ One-on-one training for lifts and transfers; follow-up demonstrations and re-demonstrations as required. ▪ Audits completed and changes made, if needed 	<ul style="list-style-type: none"> ▪ New staff orientation begins with 3 shifts, but additional shifts are added depending on need and feedback from the resource nurse. ▪ GPA training occurred for 2 resource PSWs (December 2022) ▪ Lift and transfer training (ARJO) completed for 2 Resource PSWs on June 7, 2023; will continue to train new staff and support agency staff. ▪ Resource role is in place to provide orientation and support. Working on reinforcing the 'support' for resident advocacy and improvement in care. This role has been in place since December 27, 2022. ▪ Audits: Based on feedback from staff, introducing additional PSWs into resource role, ensuring support role only.
<p>Lessons Learned</p>	<p>Using resident centered language, reinforcing the 'meaningful connections' messaging is used in every unit meeting and training session - reinforcement of messaging is ongoing in order to see any change in culture.</p> <p>Using checklists for care and transfers to outline the expectations has been used in unit meetings, periodic sign-off reminders and in training - a culture of quality care with safety at the centre of the message can be reinforced whenever an opportunity to gather as a group occurs.</p> <p>Using a float resource has been an effective way to support staff and enhance the quality of the resident experience. Choosing the right resource staff member is critical (knowledge, skill, personality). We are challenged to introduce additional staff to this role as there is reluctance (receiving negative feedback from some team members).</p>	

2024 - 2025 Quality Improvement Plan - Long-Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
Resident Centered	To provide a mealtime experience for residents that incorporates a person-centered approach to dining	Percentage of residents responding positively to overall dining room/mealtime experience based on various audits	94% (59 of 63) positive responses	96% positive responses	To match best performance in other categories on Resident Satisfaction Survey	To create a positive dining experience at all meals	Hold meetings with Nursing and Dietary departments to share survey results and QIP focus, and to review and clarify food service routines and expectations	Meetings scheduled and information reviewed	April 12, 2024	
							Hold 'Dining with Dignity' in-services with the DOC from Tabor Manor for Dietary staff, PSWs, Registered staff and Therapeutic Recreation staff	% of staff trained and/or audited	May 17, 2024	
							Nutrition Manager will establish an audit tool, schedule and conduct audits.	Audit tool created; audits scheduled and completed.	May 31, 2024	
							Nutrition Manager & Director of Care to meet to review results of audits and establish desired routines and expectations	Meeting scheduled	June 7, 2024	

2024 - 2025 Quality Improvement Plan - Long-Term Care

AIM		MEASURE				CHANGE				
Quality Dimension	Objective	Measure / Indicator	Current Performance	Target Performance	Target Justification	Planned Improvement Initiatives (change ideas)	Methods	Process Measures	Target for Process Measures	Comments
						Follow up on issues	Nutrition Manager to follow up on audit findings as needed	Follow up completed and documented	As needed/identified by Nutrition Manager	
						Educate staff on how to create a positive dining experience for residents	Audit staff to determine how they can contribute to a positive dining experience	% of staff trained and/or audited	June 28, 2024	
						We will survey 8 residents partway through the year to gauge progress in this area	Nutrition Manager or delegate will meet with 8 residents to survey them on 6 questions related to overall satisfaction based on CHOICE guiding principles (Dining with Dignity Policy)	% of positive responses	90% positive responses	

Resident Satisfaction Survey - 2023 Results

One Resident Satisfaction Survey was distributed to each Long-Term Care resident for a total of 36 surveys distributed. A total of 8 responses were received for a response rate of 22%.

Personal Care and Medical Issues	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
The personal care received such as bathing, hygiene, safety, and comfort, lifting and transferring, etc., is...	5	2	1		
Staff respect my privacy while providing personal care.	6	2			
I would rate the medical care such as treatments, medication administration, etc., as...	6	2			
How well does the doctor respond to your medical concerns?	4	4			
How would you rate the time your doctor takes with you to deal with your medical issues?	4	4			
Staff are aware of my personal preferences of routines for waking up in the morning, bedtime rituals and hygiene choices and reflect those in their daily care.	3	4			1
Staff provide care considering my strengths, preferences and needs in a non-rushed manner allowing me the optimal independence at my own pace.	4	1	2		1
If applicable, the continence products I use help to keep my skin dry, eliminates soilage on my clothes and fits comfortably.	4	4			
How would you rate the quality of the Physiotherapy services offered at Radiant Care Pleasant Manor?	2	4		2	
I was involved in decisions about care as much as I wanted to be.	5	2			1

Additional comments:

- Staff are wonderful with 1 or 2 exceptions.
- Too many agency staff.
- Doctor is excellent.
- I would like more physio services; I could use more physio services mostly for my knees & legs.
- These questions are not easy for me to answer because I am not there to see it but I am sure everything is perfect; you people are great - thanks.
- Sometimes feel like I am treated like a child. I ring the bell for help and no answer. I feel very rushed.
- Can't express preferences to staff.

Programming and Activities	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
How would you rate the effectiveness of the Resident Council?	1	3			4
How would you rate the quality of the activities you have been involved in?	4	3			1
How would you rate the variety of the activities you have been involved in?	3	3	1		1
Are the activities meaningful and enjoyable to you?	4	2			2
Staff are aware of my personal interests and hobbies and facilitate participation in these.	3	3			2
How would you rate the Chapel Services and Bible Studies?	2	4			1
How would you rate the 1:1 visitations of the chaplain?	2	4			2
I am given opportunities and supported in meeting my spiritual needs.	2	4			2

Additional comments:

- Not always included even if I can't participate.
- Love all the programs, especially music.
- Residents with advanced dementia have little involvement.
- I have seen some of these activities and again everything is great, job well done.
- Enjoy all the programs especially the travel programs.
- [The Spiritual Life Lead] does a great job.
- [The Spiritual Life Lead] is excellent, very kind & accepts me as the heathen I am!!

Dietary / Food	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
How would you rate the variety of food offered on our menu?	5	1	2		
The presentation of food is...	3	4	1		
How would you rate the temperature of the food when it's received?	4	4			
How would you rate the promptness of the meal service?	3	5			
How would you rate the seasoning and taste of the food served at Radiant Care Pleasant Manor?	4	4			
Ample time is provided so that I may eat my meal at my own pace.	5	3	1		
I am provided with appropriate, courteous assistance with my meals.	5	3			
My overall dining room experience (e.g., noise level, table mates, seating and lighting, etc.) has been...	4	2			1

Additional comments:

- Food is excellent, no complaints.
- If I did not feed my wife she would eat far less, and if one PSW in particular were feeding her she would not get enough.
- Would like some info about table mates; worry about some who appear to have trouble eating.
- I have asked if the food was good and (the resident) said yes; I have seen staff help (the resident) to eat, again very good.
- Sometimes food is good, sometimes bad.
- Service is not always on time.
- Very noisy at times.

Environmental Services	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
Radiant Care Pleasant Manor's response to maintenance issues is...		4	1		2
How would you rate our lighting?	2	5			
How would you rate the temperature inside our building?	3	3		1	
How would you rate our building for ease of mobility?	1	3	1		1
How would you rate the overall appearance of Radiant Care Pleasant Manor?	5	2	1		
How would you rate the overall comfort of Radiant Care Pleasant Manor?	3	3			1
How would you rate the suitability of your accommodation?	4	3			
How would you rate the laundry service at Radiant Care Pleasant Manor?	3	4			

Additional comments:

- Re maintenance - the installation of the new A/C unit left holes in the walls that needed patching and painting. The response was that we will not do that until the resident dies and a new resident moves in. They just put new door stops in each room after the new flooring was installed. There were holes in the wall, the fellow who installed these said he would be back to patch and paint the holes. Why one and not the other?
- Love my room.
- I have seen nothing bad for this part when I am there.
- The air conditioning is too cold. I want to turn it off in my room, but not allowed. It's freezing in my room.
- The temperature is uneven in building.
- Building doesn't lend itself to ease of mobility.
- Overall appearance of Pleasant Manor is cluttered.

Staff Communication with Residents & Families	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
How would you rate the volume of voice the staff uses to talk with you?	3	3	1		
How would you rate the clarity of speech of the staff?	2	4	1		
How would you rate our body language when we talk with you?	3	3			1
How would you rate our telephone manner?	2	1	1		3
How would you rate the staff's ability to help resolve issues?	4	2	1		
Additional comments: <ul style="list-style-type: none"> • Many staff talk over residents. • Some challenges because of some agency staff have limited English or heavy accents. • Staff is great and always communicates with me. • [Resident] has been there for over 4 months and as I have seen there is no problems at all; the staff is great. 					

Administration / Management / Office Staff	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
How would you rate management's accessibility for you?	3	4			1
How would you rate management's responsiveness and ability to address issues or complaints you have?	3	5			
How would you rate management's efforts to share information with you?	2	6			
How would you rate our office's efforts to provide you with the information you need?	3	3	1		
How would you rate our friendliness?	5	3			
Additional comments: <ul style="list-style-type: none"> • Contact up to level of Director of Clinical Services, Nutrition Manager and Therapeutic Recreation Supervisor; above them no contact with other management. • Very impressed with the efforts made by staff. • Any questions I have are always answered. • Don't understand office efforts question; information does not come from office generally. 					

Having a Voice	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
How would you rate how well the staff listen to you? <ul style="list-style-type: none"> Generally, but not always 	5	3			

	Yes	No
I can express my opinion without fear of consequences.	7	

Recommendation	Yes	No
Would you recommend Radiant Care Pleasant Manor to your family and friends?	8	

Overall Rating	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
I am treated with excellence, love and dignity.	6	2			
Overall, I rate my experience here at Radiant Care Pleasant Manor and the services I receive in all areas as...	6	2			

Additional comments:

- Excellent place to be!
- A wonderful place; grateful that [resident] is here.
- I am very pleased with the care my wife receives and everything is great.