

## **Continuous Quality Improvement Initiative Report March 2025**

### **Designated Lead**

Fola Akano, Senior Administrator Long-Term Care

### **2024 - 2025 Quality Improvements**

Please see the attached 2024 - 2025 QIP Progress Report that identifies the actions implemented based on the results of the 2023 Resident Satisfaction Survey, including timelines and outcomes.

### **2025 - 2026 Quality Priorities**

Please see attached 2025 - 2026 Quality Improvement Plan (QIP) that focuses on the following priorities:

- To promote a resident-centered approach by improving communication of information within the home for residents;
- To promote the role of family members as key partners in the circle of care by improving communication between the home and residents' family members; and,
- To develop clear, efficient workplace communication strategies between departments and staff members.

The attached QIP outlines the processes for measuring progress and implementing adjustments as needed throughout the year. Updates will be reported to the Continuous Quality Improvement Committee (CQIC) at their quarterly meetings as needed.

In addition to focusing on the above quality priorities, an annual review and refinement of all policies and procedures is completed to ensure that the highest standards are being met, maintained and updated in accordance with legislation.

### **2024 Resident Experience Survey**

For 2024, various updates were made to the Resident Experience Survey, formerly known as the Resident Satisfaction Survey. Questions were also refined to obtain more specific information with respect to care, services, programs and goods provided at the home. The updated survey was presented and approved by members at the Residents' Council meeting on October 21, 2024.

An article was included in the November 2024 resident newsletter with respect to the surveys process. On November 1, 2024, hard copies of the newsletters were provided to all residents as well as emailed to resident contacts (family members, Substitute Decision Makers (SDMs), etc.) with a deadline of November 15, 2024. A follow-up article was included in the December 2024 resident newsletter thanking all who took the time to complete the survey, and that results would be shared with the Residents' Council and, if applicable, the Family Council.

Please see attached collated 2024 Resident Experience Survey results.

The resident survey results were communicated as follows:

- A copy posted in the Resident Resource Binder on January 16, 2025, available for review by all residents, family members, caregivers and Substitute Decision Makers (SDMs).
- A copy of the survey results were distributed to supervisory staff on January 13, 2025.
- Discussed at the Residents' Council meeting of January 20, 2025.

Actions arising from the survey results as well as any future issues will be documented and shared with residents via Residents' Council meetings. Minutes will be included in the Resident Resource Binder and are available for residents, family members, caregivers and SDMs to review. Information will be shared at Family Council Meetings when the Council has been established. Regular updates are provided to staff via huddles.

### **Family / Caregiver / SDM Survey**

For 2024, a new Family / Caregiver / SDM Survey was created and distributed to applicable resident contacts to measure their experience with respect to care, services, programs and goods provided at the home.

This new survey was presented at the Residents' Council meeting of October 21, 2024 and positive feedback was received. The surveys were distributed to family contacts via email on November 1, 2024 with a deadline of November 15, 2024. Survey results were tabulated and shared with residents and actions taken for improvements were documented.

### **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:

- May 14, 2024
- October 23, 2024
- January 21, 2025

### **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.

Resident Council Meetings were held on the following:

- |                      |                     |
|----------------------|---------------------|
| ▪ April 9, 2024      | ▪ October 21, 2024  |
| ▪ May 28, 2024       | ▪ November 26, 2024 |
| ▪ June 18, 2024      | ▪ January 20, 2025  |
| ▪ July 16, 2024      | ▪ February 18, 2025 |
| ▪ August 27, 2024    | ▪ March 18, 2025    |
| ▪ September 24, 2024 |                     |

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

## **Food Committee**

A Food Committee was formed in 2024 and includes representation from both staff and residents. They continue to meet to discuss any issues related to food as identified on the survey results, as well as any new concerns that may arise.

The Food Committee met as follows:

- June 7, October 2, November 6 and December 4, 2024
- January 15, February 12 and March 24, 2025

Minutes from the previous meeting are reviewed at the next meeting. Minutes are also posted in a binder located at the Welcome Desk in Long-Term Care and are available for residents, family members, 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. An information session was held on August 22, 2024, with an additional 'Meet and Greet' scheduled on October 16, 2024. An overview was provided 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.

### **Communications with Staff**

- New hires encouraged to sign full-time or part-time lines when available to promote the continuity of staff for each home area.
- In-services conducted with all staff on resident-centered approach to care.
- Fact sheet added to PSW communication binder.

### **Training**

- Resident-centered language posters placed in nursing stations, staff areas as visual reminders for staff.
- Ongoing audits conducted and follow-up with individual staff as required to review policies and processes.
- Montessori education in-services held with staff.
- Annual lift training as well as on-site Arjo training support completed.
- Mentor PSWs provided skills review training for all staff members as well as supporting new hires as required. This approach continues to provide peer to peer training and education.
- GPA, PREP-LTC Preceptor, UFirst and Positive Approach to Care training for mentor staff.

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

<b>Objective</b>	<ul style="list-style-type: none"> <li>▪ To foster a culture of resident centered care</li> <li>▪ To increase resident satisfaction related to:               <ul style="list-style-type: none"> <li>○ Personal care including bathing, hygiene, safety and comfort, lifting, transferring etc.</li> <li>○ Personal preference for care routines</li> <li>○ Staff to provide care in a non-rushed manner while considering the strengths, preferences and needs of resident in order to allow them optimal independence at their own pace</li> </ul> </li> </ul>	
<b>Measure/Indicator from 2024 - 2025 QIP</b>	Percentage of residents responding positively (very satisfied and satisfied) to Question 6, 7 and 10 pertaining to personal care preferences and receiving care in a non-rushed manner	
<b>Current Performance as stated on 2024 - 2025 QIP</b>	<ul style="list-style-type: none"> <li>▪ <b>Question 6</b> - 87% (48 of 55) positive responses</li> <li>▪ <b>Question 7</b> - 92% (49 of 53) positive responses</li> <li>▪ <b>Question 10</b> - 78% (42 of 54) positive responses</li> </ul>	
<b>Target Performance as stated on 2024 - 2025 QIP</b>	<ul style="list-style-type: none"> <li>▪ <b>Question 6</b> - 92% positive responses</li> <li>▪ <b>Question 7</b> - 93% positive responses</li> <li>▪ <b>Question 10</b> - 85% positive responses</li> </ul>	
<b>Final Performance - End of 2024</b>	<ul style="list-style-type: none"> <li>▪ <b>Question 6</b> - 97% (31 of 32) positive responses</li> <li>▪ <b>Question 7</b> - 94% (30 of 32) positive responses</li> <li>▪ <b>Question 10</b> - 88% (29 of 33) positive responses</li> </ul>	
<b>QIP Progress</b>		
<b>Change Idea</b>	<b>Methods</b>	<b>Progress/Completion</b>
Staff will organize care that is shaped around the resident, know the resident as a whole person and use language that supports the principles of resident-centered care	<ul style="list-style-type: none"> <li>▪ Staff PSWs in day/evening lines to promote mixing of skill sets, senior and junior staff on each unit</li> </ul>	<ul style="list-style-type: none"> <li>▪ Day/evening PSW lines in place. New hires encouraged to sign full-time or part-time lines when availability allows to promote the continuity of staff on each home area</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Hold in-services to train and encourage staff to use a resident-centered approach to care; review applicable policies</li> </ul>	<ul style="list-style-type: none"> <li>▪ In-services conducted on resident-centered approach to care</li> <li>▪ Resident-centered language posters placed in nursing stations, staff areas as visual reminders for staff</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Audits completed and changes made, if needed</li> </ul>	<ul style="list-style-type: none"> <li>▪ Audits ongoing</li> </ul>

<p>Education that requires staff sign-off and includes:</p> <ul style="list-style-type: none"> <li>▪ Personal care</li> <li>▪ Safe transfers</li> <li>▪ Respecting resident's preferences for care routines</li> </ul>	<ul style="list-style-type: none"> <li>▪ Hold in-services, conduct lift training, fact sheets, and one-on-one demonstrations, Q&amp;A</li> </ul>	<ul style="list-style-type: none"> <li>▪ Montessori education in-services held with staff</li> <li>▪ Annual lift training completed; Arjo onsite training support completed</li> <li>▪ Mentor PSWs provided skills review training for all staff members. Continuing to use this approach to provide peer to peer training and education</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Complete fact sheet for all staff and add to communication binder</li> </ul>	<ul style="list-style-type: none"> <li>▪ Fact sheet added to PSW binder</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Develop worksheets for daily care with specific resident focused tasks (visits, Montessori activities) for each PSW. Worksheets to be submitted at the end of each shift</li> </ul>	<ul style="list-style-type: none"> <li>▪ Montessori challenge created between each floor to promote uptake of this approach; overall, had good response to using Montessori activities on 3 out of 4 home areas</li> <li>▪ Activity cards with instructions / supplies available on each home area</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Check-ins with residents at Residents' Council meetings</li> </ul>	<ul style="list-style-type: none"> <li>▪ Care concerns brought forward at Resident's Council have reduced</li> <li>▪ All concerns addressed and responded to in a timely manner</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Audits: <ul style="list-style-type: none"> <li>○ resident rooms</li> <li>○ resident wheelchairs for cleanliness</li> <li>○ Audits using general observations of residents' appearance to ensure appropriate personal care is completed</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ Audits ongoing.</li> <li>▪ Audit results to date have shown that residents appear well groomed and clean.</li> </ul>
<p>Include mentor staff member to:</p> <ul style="list-style-type: none"> <li>▪ Reinforce routines, reinforce non-rushed, resident centered approach</li> <li>▪ Support and train new hires</li> <li>▪ Advocate for resident care needs</li> </ul>	<ul style="list-style-type: none"> <li>▪ Additional orientation and training for new staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mentor PSW staff connecting with new hires and supporting as needed</li> <li>▪ Orientation checklist updated for PSW staff</li> </ul>
	<ul style="list-style-type: none"> <li>▪ GPA, PREP-LTC Preceptor training and UFirst training for mentor staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mentor staff have PREP-LTC training</li> <li>▪ Attended Positive Approach to Care training</li> </ul>
	<ul style="list-style-type: none"> <li>▪ Advocate for residents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Mentor staff connect with leadership to bring concerns forward as arise</li> </ul>

## Lessons Learned

The purpose of this QIP was to enhance the quality of care provided to residents to ensure they are cared for with excellence, love and dignity.

### Key Lessons Learned

#### 1. Staff training and development.

- a. Lesson: Continuous training and education of staff is necessary for maintaining high-quality care standards and ensuring staff expertise.
- b. Insight: Implementing ongoing peer to peer training as education needs are identified has increased staff competency which has positively impacted resident care.

#### 2. Staff Involvement

- a. Lesson: Promoting staff feedback and involvement in developing the methods used in the quality improvement plan enhanced staff buy-in. Encouraging senior staff to identify knowledge gaps provided direction for focusing education and training.
- b. Insight: Staff feedback helped to identify areas for improvement and shaped the approach used to provide education and training. This allowed staff to see their feedback implemented into action which positively influenced staff participation in training.

#### 3. Regular Review and Adaptation

- a. Lesson: Continuous evaluation of the quality improvement plan is necessary for sustained progress. As the QIP was implemented, new areas of focus were identified resulting in changes to the initial strategy created. By altering the plan to address the new focus area, strategies were created to fill the newly identified gaps.
- b. Insight: Reviewing the plan allowed for adjustments to strategies based on outcomes of methods used and emerging staff needs. The benefit of this approach allowed for gaps to be address sooner, rather than waiting for the next QIP cycle.

The implementation of this quality improvement plan has provided valuable insights that can be applied to QIPs in the future. Overall, this QIP has led to improving staff knowledge and skills and positioned staff to be better equipped to provide quality resident care.

### Recommendations

1. Continue to seek out staff feedback to be used in the development of QIP methods.
2. Continue to focus on providing ongoing staff education and training.
3. Regularly review care data and trends to guide improvements.
4. Maintain flexibility to adapt strategies used in the QIP based on emerging challenges and opportunities.



Let's Make Healthy  
Change Happen.



# Quality Improvement Plan (QIP) Narrative for Health Care Organizations in Ontario

Radiant  
Care  
Tabor  
Manor

Long-Term Care  
March 2025

This document is intended to provide health care organizations in Ontario with guidance as to how they can develop a Quality Improvement Plan. While much effort and care has gone into preparing this document, this document should not be relied on as legal advice and organizations should consult with their legal, governance and other relevant advisors as appropriate in preparing their quality improvement plans. Furthermore, organizations are free to design their own public quality improvement plans using alternative formats and contents, provided that they submit a version of their quality improvement plan to Health Quality Ontario (if required) in the format described herein.

[ontario.ca/excellentcare](https://ontario.ca/excellentcare)

## Overview of Our Organization's Quality Improvement Plan

### Overview

Our Quality Improvement Plan (QIP) focuses on two main objectives: (1) to enhance a resident-centered approach by improving communication within the home for residents, and (2) to empower family members as essential partners in the care circle by enhancing communication between the home and residents' families. We selected these objectives in response to feedback from Long-Term Care (LTC) residents, which indicated that communication was an area of lower satisfaction in the 2024 Resident Satisfaction Surveys.

Our QIP aligns with the quality objectives outlined in our organization's strategic plan and complies with our Long-Term Care Service Accountability Agreement (L-SAA). Additionally, our plan is consistent with provincial and regional strategies that prioritize client-centered care, as well as the Seniors Strategy in the province.

Over the past year, we have dedicated most of our staff's time and energy to ensuring the safety and support of our residents, staff, visitors, and family members. We will continue to prioritize quality improvement efforts aimed at enhancing resident satisfaction, particularly in strengthening communication between the home, residents, and their families.

### Resident Experience

This year's Quality Improvement Plan (QIP) has been developed in consultation with our Resident Council to enhance resident satisfaction, specifically regarding communication between the home, residents, and their family members, based on the feedback received.

We are committed to collaborating with residents and gathering their feedback through regular Resident Council meetings and our annual Resident Satisfaction Surveys. After identifying areas for improvement, we held discussions with the Resident Council, which supported our focus on enhancing communication between the home, residents, and their family members in the coming year. Our staff will create an action plan and report back to both the Resident Council and Family Council to share our strategies for improving resident satisfaction.

### Contact Information

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### Sign-off

I have reviewed and approved our organization's Quality Improvement Plan



John Krause, Board Chair



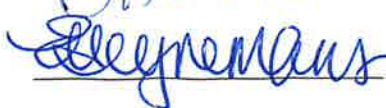
Tim Siemens, Chief Executive Officer



Fola Akano, Senior Administrator Long-Term Care & Continuous Quality Improvement Committee Chair/Lead



Bronwen Hadfield, Administrator Long-Term Care



Erin Heynemans, Director of Care

Radiant Care Tabor Manor 2025 - 2026 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
Communication	To promote a resident-centered approach by improving communication of information within the home for residents	Percentage of residents responding positively to the following questions: <b>(1)</b> Staff awareness of my personal preferences of routines for waking up in the morning, bedtime rituals and hygiene choices, and reflection of awareness in their daily care; <b>(2)</b> Staff care that considers my strengths, preferences and needs in a non-rushed manner allowing me the optimal independence at my own pace; <b>(3)</b> Physiotherapy services offered at Radiant Care Tabor Manor; <b>(4)</b> I was involved in decisions about my care as much as I wanted to be	93% (111 of 120) positive responses	95% positive responses	To match best performance in other categories on the Resident Experience Survey	Review and update existing admission information packages  Create poster that outlines roles, responsibilities, and contact information for each department	Review existing packages  Coordinate with admission team to update admission packages  Review information monthly and update as needed  Create poster  Hang poster on bulletin board at main entrance to ensure easy accessibility to pertinent information within the home  Review information monthly and update as required	Information reviewed  Updates made  Information reviewed  Poster created  Bulletin board updated  Information reviewed	April 1, 2025  April 30, 2025  Monthly / Ongoing  April 30, 2025  May 15, 2025 (and updated as required)  Monthly / Ongoing

Radiant Care Tabor Manor 2025 - 2026 Quality Improvement Plan - Long-Term Care

						Create 'Who I Am' person-centered information poster to be posted on the back of every resident door to promote personalized care	Create template	Template created	April 30, 2025
							Obtain resident-specific information from residents, family and staff	Information obtained and added to template for each resident	May 15, 2025
							Mount holders to the back of each resident room door to ensure poster is secure	Holders mounted & posters added	May 30, 2025
							Review and update information as required	Information reviewed and updated	Ongoing
						Improve existing newsletter to be resident focused	Redesign existing newsletter template to be specifically focused on residents	New template created	April 15, 2025
							Newsletter to be proof read and approved prior to distribution by TR Supervisor	Newsletter finalized and approved	Ongoing; last Friday of every month
							Staff to deliver approved newsletter to each resident at the beginning of each month	Newsletter delivered to all residents via TR staff and posted to Radiant Care website by Administrative Assistant	Ongoing; at the beginning of each month

Radiant Care Tabor Manor 2025 - 2026 Quality Improvement Plan - Long-Term Care

	To promote the role of family members as key partners in the circle of care by improving communication between the home and residents' family members					Create a monthly newsletter for family members to provide updates related to the home. This will allow for clear communication and the timely distribution of information. Newsletter will be sent out via email to families with a copy available on the website (This is in addition to existing resident newsletter)	Design a newsletter template to be used each month  Each department in LTC will provide monthly news and updates within their departments; monthly due date will be assigned to ensure timely completion; newsletter to be approved prior to distribution  Update the bulletin board in the main entrance	Template created  Departments submit information; recurring due date added to supervisors' calendars  Newsletter distributed / posted	April 1, 2025  Monthly / Ongoing  First Friday of the month; ongoing
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Radiant Care Tabor Manor 2025 - 2026 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
	To develop clear, efficient workplace communication strategies between departments and staff members					<p>Improve communication between departments through weekly supervisor meetings and home area meetings</p> <p>Improve staff knowledge of resident care</p> <p>Improve communication to staff about upcoming education and committee meetings through use of monthly calendar board</p>	<p>Weekly meetings with department supervisors</p> <p>Subsequent meetings with supervisors and staff for each home area</p> <p>Hold in-services</p> <p>Create resident care binders</p> <p>Dry erase calendar mounted in staff hallway</p> <p>Details re: education and committee meetings posted; meeting minutes added to board</p>	<p>Weekly meetings scheduled for Wednesdays; Nursing Clerk to post minutes</p> <p>Weekly meetings scheduled for Tuesdays; minutes posted</p> <p>In-services created and scheduled</p> <p>Binders created</p> <p>Dry erase board installed</p> <p>Information posted and updated as required</p>	<p>Effective April 2025 and ongoing</p> <p>Effective April 2025 and ongoing</p> <p>April 30, 2025</p> <p>April 30, 2025</p> <p>April 1, 2025</p> <p>Ongoing</p>

## Resident Experience Survey 2024 Results

A total of 35 responses were received from 125 residents for a response rate of 28%.

Survey filled out by:

Resident : 4	Family/Caregiver/SDM: 16	Unspecified: 15
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Personal Care and Medical Issues	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
Personal care received such as bathing, hygiene, safety and comfort, lifting and transferring, etc.	20	12	1		
Staff respect my privacy while providing personal care	21	11	1		
Medical concerns and medical care such as treatments, medication administration, etc. are addressed	20	10	1		
Staff awareness of my personal preferences of routines for waking up in the morning, bedtime rituals and hygiene choices, and reflection of awareness in their daily care	17	14	1		
Staff care that considers my strengths, preferences and needs in a non-rushed manner allowing me the optimal independence at my own pace	16	14	2		
If applicable, the continence products I use help to keep my skin dry, fit comfortably and eliminate soilage on my clothes	17	11	4		
Physiotherapy services offered at Radiant Care Tabor Manor	7	14	3		6
I was involved in decisions about my care as much as I wanted to be	18	11	3	1	1
<b>Additional Comments:</b> <ul style="list-style-type: none"> <li>▪ Briefs slide down</li> <li>▪ Continence products - needs attention</li> <li>▪ Physio - not enough</li> <li>▪ Do not receive in-room physio - would like to get some</li> <li>▪ Staff awareness - aware but pay no attention</li> </ul>					

Programming and Activities	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
Effectiveness of the Resident Council	3	6	1		16
Quality of activities I have been involved in	12	15			3
Variety of activities I have been involved in	10	15	1		3
Meaningful and enjoyable activities	8	16	1		2
Staff are aware of my personal interests and hobbies and facilitate participation in these	11	15	2		2
Chapel Services and Bible Studies	14	10	2		2
One-on-one visitations with the Chaplain	10	15	2		
Opportunity and support in meeting my spiritual needs	11	12	2		2
<b>Additional Comments:</b> <ul style="list-style-type: none"> <li>▪ Wish for pastoral visits (church)</li> <li>▪ Would prefer live chapel service</li> <li>▪ Would like one on one visits with chaplain - not that I remember</li> <li>▪ Quality of activities - not involved</li> <li>▪ Would like more activities</li> <li>▪ Chapel service - don't know</li> </ul>					

Dietary / Food	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
Variety of food offered on our menu	13	14	5		
Presentation of food	12	17	2		1
Temperature of food when it's received	11	13	6	1	1
Promptness of meal service	14	15	2		
Seasoning and taste of food served	12	15	4	1	
Time provided so that I may eat my meal at my own pace	13	18	1		
Appropriate, courteous assistance provided with my meals	16	13	2		1
Overall dining room experience (e.g., noise level, table mates, seating, lighting, etc.)	11	19	2		
<b>Additional Comments:</b> <ul style="list-style-type: none"> <li>▪ Satisfied that changes were made for me</li> <li>▪ Would prefer meals to be warmer</li> <li>▪ '?' in satisfied for promptness of meal</li> </ul>					



<b>Environmental Services</b>	<b>Very Satisfied</b>	<b>Satisfied</b>	<b>Dissatisfied</b>	<b>Very Dissatisfied</b>	<b>Do Not Know</b>
Radiant Care Tabor Manor's response to maintenance issues	14	13	1		3
Lighting	15	15			
Temperature inside our building	10	17	3		
Ease of mobility within our building	14	17			
Overall appearance of Radiant Care Tabor Manor	17	15			
Overall comfort of Radiant Care Tabor Manor	16	15	1		
Laundry service at Radiant Care Tabor Manor	16	14			1

**Additional Comments:**

- Ease of mobility - very satisfied since carpets were removed
- Maintenance - vent above bed too cold
- Room could be cleaned more often

<b>Staff Communication with Residents &amp; Families</b>	<b>Very Satisfied</b>	<b>Satisfied</b>	<b>Dissatisfied</b>	<b>Very Dissatisfied</b>	<b>Do Not Know</b>
Volume of voice the staff uses to talk with me	14	14	2		1
Clarity of speech of the staff	12	15	2		1
Body language when staff talk with me	12	18	1		1
Ability of staff to help resolve issues	16	12	1		1

**Additional comments:**

- Clarity of speech of the staff - some are more difficult to understand (x4)
- N/A to top two - deaf
- Ability of staff to help - '?' in satisfied

<b>Administration / Management / Office Staff</b>	<b>Very Satisfied</b>	<b>Satisfied</b>	<b>Dissatisfied</b>	<b>Very Dissatisfied</b>	<b>Do Not Know</b>
Management accessibility for me	10	10	2	1	8
Management responsiveness and ability to address issues or complaints I have	10	9	1	1	8
Management efforts to share information with me	11	13	2	1	4
Office staff efforts to provide me with the information I need	12	10	3	1	4
Friendliness	19	9		1	3

**Additional Comments:**

- They don't give me info about where my wife is upstairs (she has passed away)
- '?' in 2-4

Having a Voice	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
How well staff listen to me	13	15	3 (depends on staff member)	1	2

	Yes	No
I can express my opinion without fear of consequences	29	4

Recommendation	Yes	No
Would you recommend Radiant Care Tabor Manor to your family and friends?	31	2

Overall Rating	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	Do Not Know
I am treated with excellence, love and dignity	22	10	1	1	
Overall, rating my experience here at Radiant Care Tabor Manor and the care and services I receive in all areas	20	10	1	1	

**Additional comments:**

- It is difficult to get any answers from [resident] but I'm sure is taken good care of. Please ensure that [resident] attends all the Catholic Masses as this is very important to her; when I ask her if she attends mass, she says no one took her but I am sure you have, and she doesn't remember - thank you.
- Thrilled with Tabor Manor. I can't say enough positive things when I tell people that my mom is a resident there.
- Mom needs more help with getting dressed and undressed - fear of falling. Needs help walking more often. The room could be cleaner. Her embroidery picture she was working on was taken.
- We are very thankful for the loving care our mother is receiving here. The staff are all patient and kind. We appreciate how willing the staff is to use the whiteboard when communicating with our mom.
- PSWs are great.
- If in need of care, this is a very good place. Thank you so much for all you do for me. Much love.
- We wish physiotherapy would be a lot more happy to see staff getting mom up to walk. At breakfast, maybe no muffins with also toast being offered.
- Overall rating - satisfied sometimes.
- Tabor Manor is very clean and pleasant place to live. The staff are very professional and kind. We would highly recommend Tabor Manor. Thank you for taking such great care of our mother.
- I really like my room, thank you for letting me put up my pictures and cards, thank you for being so kind to me and helping.
- Completely satisfied with care received for [resident]. Staff are always available and caring.
- Great job to all staff members. My loved one is well cared for, thank you.

- I would love a longer bath. I wish the PSWs could take their time. I am old and cannot move quickly. Medical care and meds are not explained to me?? I would like more physio. Issues like change in routine are not communicated very good. Some staff are very hard to understand. They are courteous.
- Don't like the food selection and the vegetables are over cooked. Not enough foods I like (pasta salad, hamburger, noodle salad with small noodles). If you want to lose your hearing, come to the 4<sup>th</sup> floor and listen to the resident screaming "nurse, nurse" all day and night, and other resident walking in my room touching my things in my room.
- Residents' Council - care givers/family members should be allowed to attend and represent their family members when they are incapable of comprehension and speech - otherwise they have no voice. PSWs need to be briefed in a residents needs before starting their care. Most do not know that [resident] has little comprehension and speech!