Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

February 12, 2025

OVERVIEW

The Elliott Long-Term Care Residence remains focused in its commitment to Continuous Quality Improvement, fully embracing the enhanced focus on excellence outlined in the Fixing Long-Term Care Act, 2021 (S.O.2021, c.39, sched. 1). Through the collective expertise of our interdisciplinary team and strong collaboration with community partners, we continuously seek innovative ways to elevate the quality of care and enhance the overall well-being of our residents.

Guided by our strategic imperatives—Enhance the Elliott Community Resident Experience and Bring out the Best in Everyone—we are dedicated to fostering an environment where residents thrive. Recognizing the profound impact of the Butterfly Model of Care, we have adopted this approach as a cornerstone initiative to transform dementia care at The Elliott Community.

Developed by Meaningful Care Matters™ in the UK, the Butterfly Model prioritizes emotion-centered care, upholding dignity while holistically supporting individuals living with dementia. By focusing on meaningful engagement and nurturing connections, this model has demonstrated remarkable improvements in residents' quality of life.

In 2024, we introduced the Butterfly Model in two home areas. Encouraged by the overwhelmingly positive outcomes and feedback, we are now preparing to expand this approach across all remaining long-term care areas following accreditation of the current implementation. This year, our focus is on fully integrating Butterfly Model principles to maximize their impact and further enrich residents’ daily experiences.

To drive meaningful improvements, we have adopted a comprehensive approach to identifying priority areas for enhancement. By aligning internal and external quality drivers—such as CARF recommendations and insights from the Resident & Family Annual Experience Survey—with our strategic priorities, we ensure that our initiatives are data-driven, measurable and resident-centered.

Each domain of feedback is carefully assessed based on its impact, associated risk, peer performance, and potential for improvement. This prioritization process informs our LTC Quality Improvement Plan and integrates seamlessly into the organization-wide QIP, creating a unified strategy that optimizes resources, streamlines efforts, and maximizes success.

While we acknowledge Ontario Health's additional priority areas, our evaluation determined that they do not align as focus areas for our 2025/26 Quality Improvement Plan. However, our comments section within the QIP Workplan addresses these priorities in detail.

Please refer to the table below for the priority issues and improvement areas identified for this year.

The Elliott Community -LTC 25/26 Quality Improvement Plan Overview

Priority Issues	Indicator/Area for Improvement	Type
Theme I: Access and flow	Introduce Registered Nurses' Association of Ontario (RNAO) Clinical Pathways best practice resident assessments through the Point Click Care planning software	TEC Custom Priority
Theme II: Equity	Not included in QIP	TEC Custom Priority
Theme III: Experience	Improve residents' and families'/POAs' access to department leads and general awareness information.	TEC Custom Priority
	Improve the Quality of life of residents with the implementation of The Butterfly Model of Care	TEC Custom Priority
Theme III: Safety	Percentage of LTC residents in Fountain Home area without psychosis who were given antipsychotic medication	TEC Custom Priority

ACCESS AND FLOW

The Elliott Community is committed to ensuring timely access to evidence-based care that meets the needs of our residents.

To strengthen on-site care and reduce avoidable hospital transfers, The Elliott Community has added a full-time Registered Practical Nurse (RPN) to the Fountain Home area. This change supports the workload of the Registered Nurse (RN), allowing them to focus more on managerial and clinical oversight. By optimizing nursing roles, we enhance resident care, improve response times, and contribute to a more efficient care environment.

Additionally, The Elliott Community has embarked on a three-year project to implement the Registered Nurses' Association of Ontario (RNAO) Clinical Pathways within our home. Integrated into the PointClickCare planning software, these best-practice resident assessments support evidence-based decision-making and proactive care planning. Our initial implementation focuses on assessments for Resident Admission, Delirium, and Resident & Family-Centered Care, ensuring a comprehensive and person-centered approach to long-term care.

By embracing innovative models of care and collaborating with healthcare partners across sectors, The Elliott Community is ensuring that residents receive the right care in the right place at the right time, ultimately enhancing health outcomes and overall care experiences.

EQUITY AND INDIGENOUS HEALTH

At The Elliott Community, we are deeply committed to advancing health equity and fostering a culturally safe environment for all residents, staff, and visitors. Our approach is guided by five key pillars:

Equity as a Foundation: We embed Equity, Inclusion, Diversity, and Accessibility (EIDA) principles into every aspect of our operations, ensuring fair, respectful, and inclusive care and workplace practices. Embracing Diversity: We actively recruit, support, and retain a diverse workforce that reflects the rich backgrounds and experiences of the community we serve. This not only enhances the quality of care but also fosters deeper understanding and connection.

Inclusive Practices: We cultivate a welcoming and psychologically safe environment, where open communication is encouraged, micro-aggressions are addressed, and every individual—resident, staff, or visitor—feels valued and respected.

Honouring Cultural Safety: Our care approach integrates culturally responsive services, access to traditional healing practices, and guidance from Indigenous Elders, ensuring that every resident receives care that aligns with their values, beliefs, and traditions.

Commitment to Continuous Learning: We invest in ongoing staff education that includes implicit bias, cultural humility, and anti-racism, equipping our team with the knowledge and tools to provide compassionate, equitable, and person-centered care.

A number of our leaders are currently engaged in 2SLGBTQ learning through Rainbow Health Ontario in partnership with the Guelph Wellington Ontario Health Team. In addition, in 2024, The Elliott Community committed to the development of an Equity statement,

working with partners at Four Simple Words. Our leadership team and our Board of Trustees have been fully engaged in this training in preparation for the development of our statement and our approach. We anticipate the publication of our Equity statement by Q1 2025/26 .

Our Senior Leadership Team champions these initiatives by setting clear expectations, allocating resources, and driving meaningful, lasting progress. Through these efforts, we are building a truly inclusive community—one where every resident and staff member feels seen, respected, and empowered to thrive.

PATIENT/CLIENT/RESIDENT EXPERIENCE

At The Elliott Community, we are dedicated to delivering person-centered care by actively integrating resident feedback into our quality improvement initiatives. Input from experience surveys, care conferences, and direct resident engagement plays an important role in shaping our services and ensuring they align with individual needs and preferences of those who live at The Elliott.

Resident-Driven Decision-Making: Through the Resident Council, residents openly discuss their care, living environment, and available services, directly influencing decision-making processes. Additionally, regular care conferences provide an opportunity for residents and their families to meet with interdisciplinary care teams, review care plans, address concerns, and make personalized adjustments in real time—enhancing both care quality and resident satisfaction.

Insight-Driven Quality Improvement: The 2024 Annual Resident and Family Experience Survey, aligned with interRAI Quality of Life standards, provides valuable feedback from residents, families and their Power of Attorney/Substitute Decision Makers. These insights are carefully reviewed by key stakeholder groups, including the Senior Leadership Team, Clinical Leadership Committee, and the Corporate Affairs Committee, ensuring that identified opportunities for improvement translate into meaningful action.

From Feedback to Action: Findings from the survey—combined with recommendations from CARF and Ontario Health's QIP—inform the development of a Total Quality Improvement Plan (TQIP). The Quality Improvement Action Team then formulates targeted strategies and action steps to drive measurable enhancements in care and services. Action plan updates and outcomes are reviewed quarterly at the Clinical Leadership Committee.

Transparency and Ongoing Engagement: To promote transparency and resident engagement, key findings and action plans are; shared with the Resident and Family Councils, publicly posted on The Elliott Community's website, reinforced through additional care surveys upon a resident's departure to gather further insights for ongoing evaluation.

To ensure broad participation, surveys are offered in multiple formats—digital, hard copy, and assisted methods—making it easier for all residents to share their experiences. By consistently amplifying resident voices and fostering a culture of continuous improvement, The Elliott Community remains committed to delivering high-quality, responsive, and person-centered care.

PROVIDER EXPERIENCE

At The Elliott Community, we are committed to fostering a

supportive, engaging, and rewarding work environment that enhances both staff experience and resident care. Through strategic initiatives, continuous learning, and a strong culture of recognition, we ensure that our team feels valued, empowered, and equipped to deliver exceptional care.

Investing in Professional Growth: Our industry-leading Learning Management System provides staff with ongoing education in best practices for long-term care, supporting continuous skill development and career progression. This commitment to professional growth ensures that our team remains fully prepared to deliver excellent care.

Strengthening Communication & Engagement: Open and transparent communication is a cornerstone of our culture. We have enhanced our engagement strategies through: regular team meetings to foster collaboration, informative newsletters to keep staff updated, interactive feedback sessions to ensure every voice is heard and valued and routine engagement surveys seeking feedback regarding quality of work life.

Recognizing & Appreciating Our Team: Employee recognition is a key priority, with multiple initiatives designed to celebrate dedication and hard work: Shining Star Program – monthly employee recognition for outstanding contributions, long-service awards – honoring dedication and commitment, daily free coffee & inclusive celebrations – boosting morale and camaraderie, new appreciation initiatives that further reinforce gratitude for the effort of our staff and our volunteers.

Supporting Work-Life Balance & Wellness: To ensure a healthy work-life balance and manageable workloads, we prioritize; a 1:6 PSW-to-resident ratio for the highest quality care, fair and flexible scheduling, including compressed workweeks and remote options where feasible. In addition we offer expanding wellness initiatives, including; enhanced access to mental health resources via CloudMD and MindBeacon, a broadened wellness spending account for personalized well-being support.

Fostering a Positive Workplace Culture: To further strengthen morale and team spirit, we introduced: a traveling gratitude cart, The Moment Maker that delivers treats, work essentials, and tokens of appreciation, fostering camaraderie and reinforcing a culture of recognition, Team Enrichment Committee – Strengthening team relationships and enhancing communication between frontline staff and leadership.

Sustaining Growth & Excellence: With engaged leadership and strategic workforce planning, we have successfully maintained a positive, high-performance workplace culture. In 2024, to support our LTC Bed Expansion, we increased our workforce by over 10%. Additionally, our expanded student placement program continues to serve as a vital recruitment and education strategy, ensuring that our growing community benefits from a skilled, compassionate workforce committed to excellence in long-term.

SAFETY

As part of our Continuous Quality Improvement (CQI) program, we conduct systematic tracking and quarterly analysis of complaints and critical incidents. Each incident undergoes a thorough investigation and root cause analysis, involving interdisciplinary team discussions to identify patterns and implement corrective actions.

In alignment with Ontario Health's Never Events Hospital Reporting initiative, we emphasize the prevention of avoidable harm through enhanced medication safety protocols, falls prevention strategies, and infection control measures. Our staff receive ongoing training on incident response, with an emphasis on learning from near-misses to strengthen our safety culture. To reduce fall-related injuries, we have expanded structured physical activity programs that promote mobility and balance.

Our commitment to safety extends beyond immediate interventions. During our annual program evaluations we leverage data analytics to identify population health trends, allowing us to proactively refine care strategies. By integrating evidence-based practices and promoting a culture of continuous learning, we are dedicated to enhancing the quality of life for our residents while maintaining the highest standards of safety and care.

PALLIATIVE CARE

For those living at The Elliott with a life-limiting diagnosis, a palliative approach to care is available to ensure a balance between symptom management (comfort) and quality of life (dignity). The Elliott begins the process at admission by identifying the person's Substitute Decision Maker (SDM), discussing advance care planning with both the resident and their SDM (as outlined in the admission package), and encouraging ongoing communication to empower individuals to take an active role in their own health care decisions and goals of care conversations.

We strive to provide person-centered palliative care, which is reflected in our adoption of the Butterfly approach and RNAO Clinical Pathways. Currently, we have identified a competency gap in the comfort level of registered staff leading serious illness conversations. Our plan is to provide education tools, such as the Canadian Serious Illness Conversations Guide, to staff, facilitated by the Pain & Palliative Care lead, who is CAPCE certified.

POPULATION HEALTH MANAGEMENT

The Elliott Community is committed to proactively addressing the evolving healthcare needs of Guelph's aging population through strategic partnerships and innovative solutions. Our recent expansion, adding 29 new long-term care beds to our existing 85-bed facility, enhances our capacity to support residents and meet the increasing demand for high-quality, person-centered care. This growth reflects our dedication to ensuring equitable access to long-term care services for seniors in the community.

In collaboration with Guelph General Hospital (GGH) and other healthcare facilities, The Elliott Community is implementing the Post-Acute Care Network Management solution. This initiative facilitates seamless, real-time exchange of clinical information across healthcare settings, ensuring that residents receive coordinated, efficient, and informed care. By integrating medical record systems across organizations, healthcare providers can securely access relevant health data whenever a resident transitions between care settings. This improves continuity of care, enhances clinical decision-making, and supports better health outcomes.

Through these initiatives, The Elliott Community continues to work with healthcare partners to develop integrated, cost-effective, and person-centered solutions that respond to the unique health and social needs of our residents.

CONTACT INFORMATION/DESIGNATED LEAD

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OTHER

Quality Improvement Program Framework:

The Elliott Community's Continuous Quality Improvement (CQI) is an ongoing process aimed at enhancing resident outcomes, safety, and satisfaction. By systematically monitoring performance, identifying areas for improvement, implementing changes, and evaluating their effectiveness, CQI aligns with the Fixing Long-Term Care Act, 2021 and the 2024-2027 Strategic Imperatives.

The program operates across three organizational levels through interdisciplinary teams:

- Corporate Affairs Committee
- Leadership Forum
- Clinical Leadership Committee

These groups meet regularly to discuss change ideas, evaluate progress, and implement improvements. The CQI Lead serves as a liaison, ensuring coordination and alignment with quality improvement standards.

Quality Improvement Planning Process:

Improvement opportunities are identified through the below following .

Stakeholders Feedback:

An annual experience survey aligned with the InterRAI Quality of Life Survey was used to gather feedback from Residents and POA/Families. Separate Surveys were used for receiving feedback from residents and POA/Families. The Surveys were made available to residents and families digitally as well as through hard copies. The Survey result data was discussed with the Quality groups to identify areas for improvement.

The Annual Experience Survey was Distributed to stakeholders on: September 23, 2024 (Families & Residents)

The Annual Experience Survey was closed to stakeholders on: November 8, 2024 (Families & Residents)

Response rate:
• 135 surveys distributed
• 51 surveys to residents
• 84 surveys to POAs/SDMs
• 89 surveys completed
• 41 residents (80% response rate among residents with a CPS score lesser than or equal to 3)
• 48 POAs/SDMs (57% response rate among those contacted)

The Annual Experience Survey results highlight a high overall satisfaction rate of 81%.

The survey results were presented to stakeholders on: January 7, 2025 (Residents), January 17; 2025 (Families)

The survey action plan is due to be presented to stakeholders on: March 11, 2025 (Residents); March 20, 2025 (Families)

The Survey results are posted on the website for public view on: April 1, 2025

Key Performance Indicators:

In prioritizing areas of focus, the performance of The Elliott Community was assessed against benchmarks available for resident care (Canadian Institute for Health Information (CIHI)) and quality of life indicators. This evaluation involved comparing available performance indicators against both the Waterloo-Wellington regional averages and Ontario averages.

Organizations Strategical Goals:

The Elliott Community Strategic Plan (2024-2027) was used to support us in determining the priority areas of improvement. The following are the strategic imperatives for 2024-2027:
1. Enhance the resident experience at The Elliott Community
2. Bring out the best in everyone
3. Create community partnerships with purpose
4. Focus on financial sustainability

Health Ontario & CARF Recommendations:

A review of Ontario Health's priority areas for 2025-26 and findings from The Elliott Community's CARF Accreditation Report (August 2, 2024) to assess the feasibility of suggested improvements.

Prioritization & Integration:

Priority areas for improvement are determined based on the following below.

- Performance relative to regional and provincial benchmarks.
- Associated risks and potential impact on resident care.
- The effort-to-impact ratio for proposed initiatives.
- Interdisciplinary team insights on scope and feasibility.

These evaluations inform the development of a Total Quality Improvement Plan (TQIP), integrating the LTC 25/26 QIP alongside other organizational quality initiatives. By consolidating multiple improvement plans into a single, cohesive strategy, The Elliott Community optimizes resources, streamlines processes, and ensures the successful implementation of its Quality Improvement Plan (QIP).

Quality Priorities and Action Plan FOR 2025/26:

The Elliott Community developed an annual Quality Improvement Plan, aligned with Ontario Health priorities. We have monitored indicators for the 2024-25 year and will submit a Progress report, along with this Narrative report, and a Work plan report to Health Ontario by March 31st, 2025, and published these reports on The Elliott Community Website.

The objectives and action plans for improvement are integrated into the annual program evaluations of respective programs/services using the SMART goal framework (Specific, Measurable, Attainable, Relevant, Timely). Each program evaluation is overseen by a designated lead responsible for executing these action plans and reporting progress at the Clinical Leadership Committee during the quarterly review of Annual Program Evaluation Goals Summaries.

25/26 QIP Submission Date to Health Ontario: March7, 2025
25/26 QIP Elliott community Website Published Date: April 1, 2025

SIGN-OFF

It is recommended that the following individuals review and sign-off on your organization's Quality Improvement Plan (where applicable):

I have reviewed and approved our organization's Quality Improvement Plan on **March 7, 2025**

Michelle Karker
Michelle Karker (Mar 11, 2025 11:38 EDT)

Michelle Karker, CEO

Martin Ruaux
Martin Ruaux (Mar 7, 2025 11:56 EST)

Martin Ruaux, Administrator

Heather Van Cauwenberghe

Heather Van Cauwenburghe, DOC

Jocelyn Alves (Mar 7, 2025 11:47 EST)

Jocelyn Alves, Quality Improvement and Risk Management Resource Nurse

2025-26 narrative_ Final

Final Audit Report 2025-03-11

Created:	2025-03-07
By:	Jocelyn Alves (jalves@elliottcommunity.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAAv2MfjjygrRe933DIx6zuiFk2dae9CE4U

"2025-26 narrative_ Final" History

Document created by Jocelyn Alves (jalves@elliottcommunity.org)
2025-03-07 - 4:46:47 PM GMT

Document emailed to Michelle Karker (mkarker@elliottcommunity.org) for signature
2025-03-07 - 4:46:55 PM GMT

Document emailed to Martin Ruaux (mruaux@elliottcommunity.org) for signature
2025-03-07 - 4:46:55 PM GMT

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2025-03-07 - 4:46:55 PM GMT

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2025-03-07 - 4:46:55 PM GMT

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2025-03-07 - 4:47:19 PM GMT

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2025-03-07 - 4:56:29 PM GMT

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