



## Continuous Quality Improvement Initiative Report 2025

### Designate Lead

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### Quality Improvements in 2024

The progress report for the 2025/26 Quality Improvement Plan (QIP), submitted to Ontario Health, outlines the status of the initiatives aimed at addressing areas for improvement identified in the 2024/25 QIP. This report is accessible on The Elliott Community's website. Additionally, alongside the mentioned quality initiatives, further improvements as mentioned below have been implemented based on the action plan derived from the Annual Experience Survey and identified areas of improvement.

- Expanding evening programming in retirement home areas
- Elevating the accessibility and diversity of weekend and evening programming in long-term care home areas
- Implementing interdisciplinary strategies to enhance awareness of recreational activities available
- Installing new steam tables in serveries to increase consistency of temperatures of meals served
- Implementing The Butterfly Approach to care, a person-centered, social model of care, on three of the long-term care home areas
- Utilizing technology to enhance and promote more effective communication

### Quality Improvement Framework

Continuous Quality Improvement (CQI) at The Elliott Community refers to an ongoing process of identifying, assessing, and improving various aspects of care and services provided to residents. It involves systematic efforts to monitor performance, identify areas for

improvement, implement changes, and evaluate their effectiveness, with the ultimate goal of enhancing resident outcomes, safety, and satisfaction. The program is set to align with the Fixing Long-Term Care Act, 2021 and the 2024-2027 Strategic Imperatives established by the organization in alignment with our mission.

The Program operates through three functional bodies, comprised of interdisciplinary team members and stakeholders, functioning across three organizational levels.

- Corporate Affairs Committee of the Board of Trustees
- Continuous Quality Improvement Committee of the Clinical Leadership Team
- Departmental Program Leads for Quality Improvement Activities and Projects

Members of these groups meet at regular intervals to discuss change ideas, evaluate progress, make recommendations, and facilitate change. The CQI Lead acts as the liaison between these groups to effectively coordinate quality improvement programs. Together they collaborate to meet the standards for Continuous Quality Improvement as outlined in Fixing Long-Term Care Act, 2021.

### Quality Improvement Planning Process

The priority areas for 2025/26 QIP were collectively determined by the quality improvement groups after considering the following factors.

- Stakeholders Feedback
- Performance Indicators and peer group performance in the region
- Organizational Strategical Goals
- Ontario Health Recommendations

#### **Stakeholders Feedback:**

An annual experience survey aligned with the InterRAI Quality of Life Survey was used to gather feedback from people who live here and their families. Surveys were designed differently for each of these stakeholder groups. . The surveys were made available digitally as well as through paper copies. Results data was discussed with the quality teams to develop goals and action plans 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:	<ul style="list-style-type: none"><li>• 135 surveys were attempted</li><li>• 51 residents</li><li>• 84 POAs/SDMs</li></ul>

	<ul style="list-style-type: none"> <li>• 89 surveys were completed</li> <li>• 41 residents (80% of residents with a CPS score of <math>\leq 3</math>)</li> <li>• 48 POAs/SDMs (57% of those contacted)</li> </ul>
The Annual Experience Survey results and action plan were presented to stakeholders on:	<p>March 11, 2025 (Residents)  April 23, 2025 (Families)  (The Survey results are posted on the website for public view on May 1, 2025)</p>

#### **Performance Indicators and peer group performance in the region:**

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 Strategic 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 Recommendations:**

Ontario Health's priority areas for 2025-26 are:

- 1) Potentially avoidable emergency department visits for long-term care residents;
- 2) Staff completion of relevant equity, diversity, inclusion, and antiracism education;
- 3) Residents have a voice and are listened to by staff;
- 4) Residents feel they can speak up without fear of consequences;
- 5) Residents given antipsychotic medications without a diagnosis; and
- 6) Falls in Residents.

We recognize Ontario Health's priority areas of focus and have addressed them in our comments section of the QIP Work plan, however, we are consistently exceeding provincial benchmarks in those areas of focus. Consequently, we have decided not to include those indicators in our areas of focus for the 25/26 Quality Improvement Plan.

### Quality Priorities and Action Plan for 25/26

The Elliott Community developed an annual Quality Improvement Plan, aligned with Ontario Health priorities. We have monitored indicators for the 2024-25 year and submitted a Progress report, as well as a 25/26 Narrative report and Workplan to Ontario Health on March 7th, 2025. These are published 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, and Timely). Each program evaluation is overseen by a designated lead responsible for executing these action plans and reporting progress at the Continuous Quality Improvement Committee during the quarterly review of Annual Program Evaluation Goals Summaries.

25/26 QIP Submission Date to Health Ontario:	March 7, 2025
25/26 QIP Elliott community Website Published Date:	May 1, 2025