

Quality Improvement Plan (QIP)

Narrative for Health Care Organizations in Ontario

February 10, 2025

OVERVIEW

Trinity Village Care Centre has been serving our older adult community since 1972. We have embraced numerous technologies through our Continuous Quality Improvement program. The Quality Care Committee generates a Quarterly Report Card that includes risk indicators by home area and is shared with staff and the board. The technology reports provide information for the front-line staff performance reports attendance, task completion, resident documentation completion, and documentation time from task time for accuracy.

AI technology can take out human interpretation to make better clinical decisions. Trinity Village is a recipient of the 2024 Canadian Business Excellence Awards (CBEA) for Private Businesses presented by Excellence Canada for clearly demonstrating a strategic approach to successfully improving business performance and achieving goals, with a focus on the following three key performance areas: Delighted Customers; Engaged Employees; and Innovation.

2024 Best Nursing Home in Kitchener for 2024 by the Quality Business Awards. We achieved an overall quality score exceeding 95%. This award speaks volumes about the dedication of our Staff and our commitment to providing exceptional care.

Stage 2 to 4 pressure ulcers worsen to separate ulcer statistics, including chronic vs unresolvable.

We exceeded the number of ER visits, and our efforts to reduce visits will focus further on reducing avoidable visits from 9 to 6.

Incorporate AI resident routine data within the room to better

understand resident routine leading to high falls locations.

ACCESS AND FLOW

Trinity Village provides a large selection of personalized services by a team of qualified and compassionate staff. We strive to meet each resident's unique needs and preferences, developing individualized care plans. Our commitment to quality is reflected in our well-maintained facilities and varied programs. We create a safe, nurturing environment where residents can thrive and enjoy a fulfilling life.

We have adopted a systematic approach through Continuous Quality Improvement to making changes that lead to better resident outcomes (health), more robust system performance (care), and enhanced professional development. Trinity Village draws on the combined and continuous efforts of all departments and stakeholders, including residents and their families, to make better and sustained improvements.

We recognize the need for access to the right care at the right time. As a group of health care providers from different fields (including three Physicians and a Nurse Practitioner), we work together and toward the same goal of providing the best care and outcome for our residents. This interdisciplinary approach has lead and will continue to lead to a reduction in wait times for residents to be seen by a licensed practitioner. In addition, Trinity Village has obtained laboratory services three times a week, with one day being later in the morning to accommodate resident preference. Utilizing the expertise and additional on-site clinical testing, we are focusing on a targeted approach towards hospital transfers to reduce potentially avoidable visits to hospital, by advocating for

treatment within the home whenever possible. This targeted approach will be the focus of the Nurse Practitioner and Assistant Director of Care, who will focus on Staff education, interventions and follow-up as well as follow-up and health teaching with residents and families.

EQUITY AND INDIGENOUS HEALTH

Trinity Village's approach to health equity starts with our Mission Statement: "A caring community which values and fosters the worth and lifestyle of all."

2024 / 2025 Initiatives

"Overview Introduction to Reconciliation" by Stephen Jackson, M.A.S. CEO Anishanabeg Outreach Centre Homelessness / Mental Health / Addictions / Poverty to Prosperity / Indigenous Agriculture. AO Farm shared Medicinal Plants for our Community Garden, and an Interpretation Kiosk explaining the purpose of each was made and displayed. 2025 education workshop "Medicinal Plants and their Use."

Applied a new approach to staff burnout from the effects of COVID:" Spirit Building Lodge," a healing technique to overcome obstacles and build strength for the future. The program was positive and well-received.

Our Land Acknowledgement Statement was reviewed and updated in collaboration with residents, staff, and board led by a Reconciliation Thought Leader. "We are a group of passionate care partners who want a better life for older adults in the Region of Waterloo. Together, we are committed to fostering a community where everyone can enjoy a life of well-being and purpose. We

want to acknowledge that we are on the traditional territory of the Haudenosaunee, Anishinaabeg, and Neutral Peoples. Trinity Village is situated on the Haldimand Tract, the land promised to the Six Nations, which includes six miles on each side of the Grand River."

2025 Initiative - Our continuous quality improvement process includes - identifying the needs of those we serve and their perspective of the care provided. Where applicable, we share the outcomes with others - OLTC, OLTC Quality Committee, Advantage, Anishinaabe Family Centre, BSO Committee, Regional LTC Network, Ontario LTC Innovation Committee, and KW4 Ontario Health.

PATIENT/CLIENT/RESIDENT EXPERIENCE

Each department and team/committee completes an annual review and goal development, including a review of what went well, areas for improvement, statistic comparison, survey results, emails, verbal statements, website questions, compliments, complaints, and in-house praise reports. The information is assembled into dashboards and shared through Spring Town Hall meetings with residents, care partners, staff, mandatory staff meetings, resident monthly meetings, board committees, and the annual report.

An initiative implemented during the annual review was implementing a monthly resident and care partner orientation for all managers. To improve communication and opportunities for questions. It is always fascinating that at these orientations, when asked how many previous experience with long-term care have, 90% state none, only that of the media. Supporting the value of orientation sessions and an initiative for measuring a decrease in unfounded complaints.

Trinity Village added to the website "myPortal" for residents and care partners to access information specific to their home area and site-wide to provide updates. The portal sends notifications to the members when updates are added. There are also questions, compliments, and complaint tabs with the necessary information for a quicker response, a streamlined process, and auto-generated reports for improved analysis purposes. For those unable to access the website, paper submission forms or requests for assistance to complete are available.

Throughout the year, residents, care partners, and staff meet to communicate and provide feedback for improved services on care and work-life experiences via monthly resident meetings, care conferences, staff department meetings, and Mandatory Committees. 88% satisfaction results were received from the resident & family member wellness survey. Quarterly distributed report cards (house, enterprise risk management, strategic, and department goals) are provided to keep everyone current.

PROVIDER EXPERIENCE

Staffing has been a systemic problem that has impacted long-term care. Staffing shortages can lead to burnout, stress, and high turnover rates. There are no statistics for the average turnover rate in long-term care; other than that, it is higher than the hospital average, which is 19.5%. Trinity Village is 15%, with 1.2% of staff being terminated by the employer. Otherwise, staff leave for a position closer to their home and/or a permanent full-time position.

Based on our continuous quality annual review process, we have

created new positions RPN and PSW (days and evenings per floor) float lines to mitigate working short and agency use. Floor Supervisors with a PSW background workday, evening, and weekend shift—auditing processes, delivering supplies to home areas, and improving communication.

Front-line staff are provided with an APP DOCit submitting resident, staff, and care partner questions with a daily generated report to management for follow-up, a shift experience survey, and a generated report to managers for improved communication and follow-up if required.

Improved communication and team building with 8-hour paid in-person annual Mandatory Training. Electronic Annual Staff Experience Survey, Annual Staff Resident Wellbeing Survey – staff perspective on the care the organization receives from residents. Employee Council / Equity and Diversity Committee – previously separate, now a combined group. Provide staff with the information they need to do the job with detailed Handbooks (Employee and Discipline-specific) available online through Surge—creating a Medication Compliance Manager position.

SAFETY

As a home, we have recognized the need to review and adapt actions from patient safety incidents. Our Joint Health and Safety Committee created and implemented a new form in which we, as a home, can better analyze the data collected through these forms. The Health & Safety Incident/Witness Forms help us capture better information and aid in looking at prevention strategies for risk management through generated reports. Trinity Village's goal is to ensure that all are safe in the home and that any incident can be

analyzed to determine the root cause and potential for change to increase safety.

Through our online form and DOCit shift experience and comment reports, we utilize staff feedback, Management analysis, and Joint Health and Safety team review for process improvements within the home. The data submitted through these forms helps the organization generate changes when a pattern is recognized. In collaboration, our Behavioural Supports Ontario (BSO) Team and Falls Team are also brought in to provide assessments and ideas for change.

Trinity Village encourages a highly collaborative team environment to ensure that all aspects of an incident are reviewed to ensure safety for all. In addition, our Health and Safety Team audits and assesses the entire building monthly to reduce incident risk and flag potential concerns to be proactively changed. Currently, we are also increasing the number of Health and Safety Team members who are WSIB and PSHSA certified to increase knowledgeable Staff who can identify risks and opportunities for change.

Finally, in addition to our team analysis and approach, we have a Quality Care Manager who reviews resident and staff safety items to reduce risk in both areas.

PALLIATIVE CARE

Trinity Village understands and recognizes the significance of providing high-quality care, comfort, safety, and assistance during the Palliative and end-of-life stages.

To ensure the best practice for care, Trinity Village created an order

set for palliative and end-of-life care. The order set includes standardized care items and medication options that provide guidelines as per the Pharmacist's best practice recommendation, recognizing the individualized needs per resident. It also considers any naiveties or tolerances to ensure optimal pain and symptom management. In addition, it allows the Physicians and Nurse Practitioner to prescribe when a significant decline, heading towards palliative or end-of-life care, has been noted to proactively have medications ready for implementation when symptomatic criteria is met (as denoted on the order set), at the initial stage of palliation or end of life. The order set follows access and flow, recognizing the need for proper care at the right time.

In addition, Trinity Village still employs palliative care and end-of-life paper checklists. Although we recognize that we are an organization moving away from paper to be environmentally conscious, paper charting forces Staff to be present and chart now for the hourly check-ins that are required by Staff.

Trinity Village Care Centre also meets to discuss palliative and end-of-life care. An interdisciplinary team holds monthly meetings, and care conferences can be held as needed for significant change.

Through these aspects of palliative and end-of-life care, Trinity Village will continue to provide and improve the support at the initiation of palliative or end-of-life care and, on an ongoing basis, to address the resident and the family's needs at each stage.

POPULATION HEALTH MANAGEMENT

Trinity Village recognizes that residents deserve to live at their full potential. We ensure that residents have the assessments needed

to determine how to achieve their full potential, acknowledging that they may not choose to access them. Upon admission, residents have access to the following resources to promote health, prevent disease, and support them in every interaction within our LTC home. We also recognize that care needs, plans, and wishes change along the resident's continuum of care. The interdisciplinary team, along with our allied external partners, aims to constantly evaluate and provide services that meet each resident's changing needs, plans, and wishes on an individual basis.

Interdisciplinary Team

- Resident and their Care Partners
- Medical Directors(s) and Physician
- Nurse Practitioner
- Front Line Team (Nursing, Housekeeping, Programming Staff, Music Therapist, Spiritual Care Provider,
- Horticulture/Apiary Worker, Recreation, Food Service Worker)
- BSO team (Social Worker, Nursing and Programming)
- Pain and Palliative Care Committee
- Skin and Wound Care Committee utilizing PCC Wound Care APP
- Falls and Restraints Committee
- RAI MDS Restorative Care Committee
- Infection Prevention and Control Committee
- CQI Committee

External Partners

- Nursing: VitalHub – co-design APP DOCit resident and staff task and assessment control – DOS recording
- Nursing/Medication: CareRx, ProResp
- Advanced Nursing: Foot Care Nurse
- Medical Imaging: STL, WMMI

- Achieva Physiotherapy and Occupational Therapy
- LifeLabs: 3 visits per week
- BSO: PRC, BSO community, Geri-psych
- Palliative: Hospice Waterloo
- Wound Care: ET Nurse – DOCit - Falls: Elephas Care
- IPAC: Public Health, IPAC Hub
- Education: NLOT, RNAO
- Legislation: MOH LTC, CNO, MOL, KW4 ON@Home
- Accreditation: CARF
- Elephas Care: AI resident room motion monitoring and staff notification
- Trueloo: AI resident waste management
- KR Communications: resident safety monitoring systems
- 5D Computers: technology infrastructure, software and hardware management
- Global DWS: Greeter Robots monitoring visitor
- Associations: OLTC, Advantage, LTC Innovation Network, Region LTC Network

OTHER

We embrace technology for improved staff well-being and resident care. Technology removes human interpretation and provides accurate information, allowing staff to make better clinical decisions. Technology also provides automated generated reports, allowing for quicker analysis and ah-ha moments that would have been lost. Technology has streamlined processes to be more effective and efficient and sped up the quality improvement process. Along with identifying gaps that were not visible before but provide us with a more accurate look at the care we provide to both residents and staff. In 2024, we shared our technology journey with 10 facilities and over 45 staff.

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
Friday, March 28th, 2025

Mike Gallant

Mike Gallant (Mar 28, 2025 12:53 EDT)

Board Chair / Licensee or delegate

Robby Depert

Administrator / Executive Director

Robby Depert

Quality Committee Chair or delegate

Other leadership as appropriate


2025-2026 QIP Narrative

Final Audit Report

2025-03-28

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