# ROYAL TERRACE LONG TERM CARE QUALITY PLAN AND REPORT APRIL 2025

### **BACKGROUND:**

Royal Terrace is committed to continuous quality improvement to improve care for residents and practices for team members. Royal Terrace believes in transparency with quality improvement and through a variety of processes we are always looking for opportunities to be pro-active, efficient, and innovative while streamlining, revising and developing new processes for clinical and operational effectiveness. Continuous Quality Improvement is an ongoing process and considered vital to all work departments within Royal Terrace.

Royal Terrace is committed to resident-directed, safe, quality care that is inline with The Residents' Bill of Rights within an inclusive environment that supports quality improvement and revolution.

# INTRODUCTION:

Quality Improvement is collected in a variety of ways.

Royal Terrace participates in CARF International Accreditation, which is a voluntary process that ensures the optimal standards are met for health services and quality care to older adults.

Royal Terrace currently holds a 3-year accreditation valid until October 31, 2025.

Royal Terrace additionally seeks input from team members, residents, family members, and persons of importance to residents through surveys. Surveys are conducted annually, and results are shared with residents, team members and families.

Resident and family communication and feedback is also sought through resident committees such as Residents' Council and Food Committee as well as Family Council, where suggestions and concerns can be brought forth.

Team Members can additionally provide suggestions and concerns through General Staff Meetings, which are held 9 times a year, and departmental meetings, which are held 4-6 times a year depending on the department. Interprofessional meetings such as Professional Advisory Committee (PAC) and Quality Improvement Committee (QIC) meetings are held on a quarterly basis where quality improvement plans are reviewed and discussed.

Target areas are determined through internal and external benchmarks such as various audits, program evaluations, legislation and other reviewed such as the Ministry of Long-Term Care, Public Health, Ministry of Labour and other internal or external stakeholders' inspections.

Through Health Quality Ontario a Quality Improvement Plan is submitted annually and reviewed by the homes QIC to determine focus areas for improvement.

The attached plan outlines our quality commitment to the residents, team members and community partners to improve specific issues through determined targets and actions.

# **QUALITY IMPROVEMENT COMMITTEE**

Our designate QI lead is Hailey Caldwell.

Members included in the QI Committee are but not limited to Administrator, Director of Care, Medical Director, Dietary and Environmental Manager, Life Enrichment Manager, Retirement Home Manager, Registered Dietician, Pharmacy Consultant, Registered Physiotherapist, Public Health Representative, Quality Care Lead, IPAC Lead, PSW and Nursing Staff Representative, Resident Council Representative and Family Council Representative if available.

# **RESPONSIBILITIES OF THE QI COMMITTEE**

- To monitor and report on quality issues, residents' quality of life, and the overall quality of care and services provided within Royal Terrace, with reference to appropriate data.
- To identify and make suggestions regarding priority areas for quality improvement within the home.
- To coordinate and support the implementation of quality improvement initiatives within the home as well as but not limited to preparing the report on continuous quality improvement.

# **QUALITY IMPROVEMENT AND OPERATIONS**

- QI initiatives are identified through a variety of ways, such as satisfaction surveys, concerns or complaints reviews, informal and formal meetings, program evaluations, audits, or compliance. The QI Committee then identifies initiatives and are addressed based on priority, such as high risk of satisfaction feedback.
- The QI plan will be developed and implemented and communicated then to the QI
  Committee. Information will then be shared with residents, families, and team
  members. The QI Committee will review and update quality initiatives on an ongoing
  basis during meetings and revise as necessary. Updates will be communicated to
  Residents' Council, families and team members.
- Policies, procedures, audits, and other resources are available within the home at their designated location, and can be available to others upon request.
- Dissemination of the quality improvement plan and report will be available on our website, with copies provided to Residents' Council, Family Council as available and upon request within the home.

### **QUALITY IMPROVEMENT INTIATIVE SUMMARY FOR FISCAL YEAR 2025**

# Overview:

Royal Terrace's building was completed in 1989 in the rural community of Palmerston, Ontario. Royal Terrace has excelled in the delivery of care and services to its 67 residents. It has provided a warm and loving home for many seniors and a wonderful workplace atmosphere for staff.

# **Building and Environmental Improvements:**

- 1. Install new call bell system.
- 2. Replace eavestrough around the building.
- 3. Make 2<sup>nd</sup> entrance into Royal Terrace safe to use throughout the winter and moving forward.
- 4. Renovate Quiet Lounge

# **Clinical Programs:**

- 1. Lab Integration through PCC (late 2025)
- 2. Performance Insights through PCC
- 3. IPAC Consulting

# **Communication and Technology:**

- 1. Upgrade WIFI services to accommodate increased device use.
- 2. Hardwire Meal Suite TVs to internet for consistency and reduce disruption of use.

# Access and Flow

- 1. Reduce ED Visits continue to education Registered staff and utilize resources accessible whenever possible.
- 2. Reduce Falls reduce falls risk and serious injury with increased use of fall prevention techniques. Registered for PREVENT Trial with McMaster
- 3. Palliative Care provide education and supports to families and residents on end-of-life care. Continue to communicate with Dr's to ensure streamlined palliative medication orders.

# Safety

1. Revised and implemented a new Return to Work routine.

# **Retention and Recruitment**

1. To continue to not have to utilize Agency Staff for coverage in all departments.

# **Resident-Centered Care**

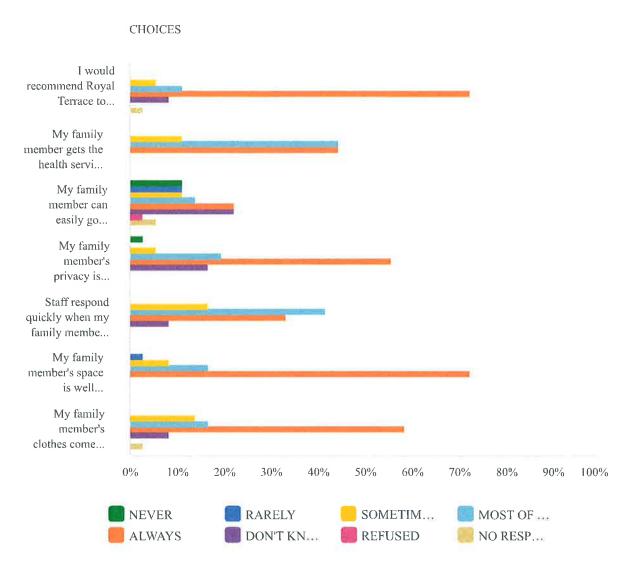
1. To have all staff complete annual training modules by end of October 2025.

2. Review Resident and Family Satisfaction Surveys with staff to implement enhanced

resident-centered care.

# 2024/2025 Family Satisfaction Survey Analysis

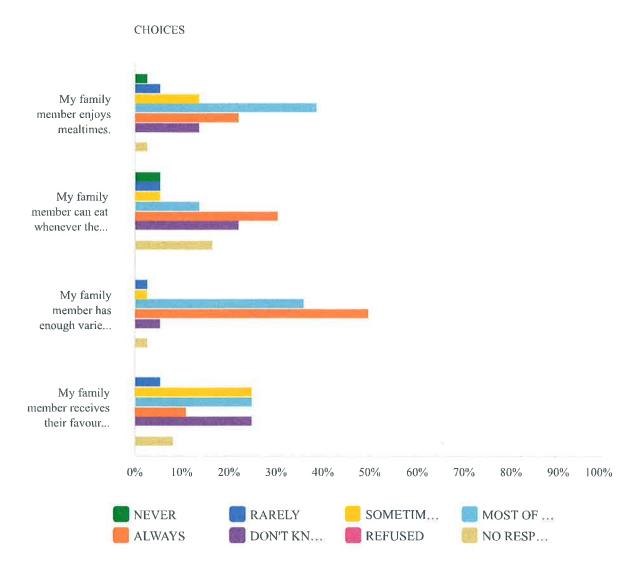
# Safety, Security, and Comfort: For each statement, please answer with one of the available choices.



# CHOICES

		NEVER -	RARELY -	SOMETIMES -	MOST OF THE TIME	ALWAYS -	DON'T KNOW	REFUSED -	NO RESPONSE	TOTAL ~
	I would recommend Royal Terrace to others.	0.00%	0.00%	5.56% 2	11.11% 4	72.22% 26	8.33%	0.00%	2.78% 1	36
-	My family member gets the health services he/she needs.	0.00% 0	0.00% 0	11.11% 4	44.44% 16	44.44% 16	0.00% 0	0.00% 0	0.00%	36
2	My family member can easily go outside.	11.11% 4	11.11% 4	11.11% 4	13.89% 5	22.22% 8	22.22% 8	2.78% 1	5.56% 2	36
2	My family member's privacy is respected when people care for him/her.	2.78% 1	0.00% 0	5.56% 2	19.44% 7	55.56% 20	16.67% 6	0.00%	0.00%	36
-	Staff respond quickly when my family member requires assistance.	0.00% 0	0.00%	16.67% 6	41.67% 15	33.33% 12	8.33% 3	0.00% 0	0.00% 0	36
=	My family member's space is well maintained and clean.	0.00%	2.78% 1	8,33% 3	16,67% 6	72.22% 26	0.00% 0	0.00%	0.00% 0	36
2	My family member's clothes come back clean and in a timely manner.	0.00% 0	0.00%	13.89% 5	16.67% 6	58.33% 21	8,33% 3	0.00% 0	2.78% 1	36

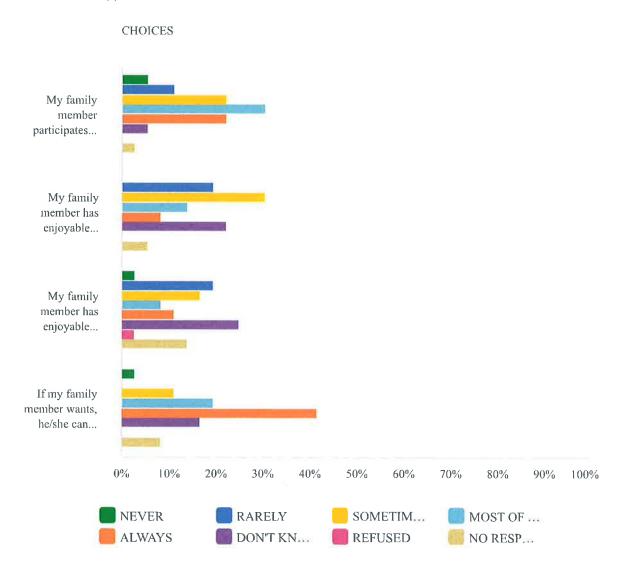
# Meal Service: For each statement, please answer with one of the available choices.



# CHOICES

		NEVER -	RARELY -	SOMETIMES -	MOST OF THE TIME	ALWAYS -	DON'T KNOW	REFUSED -	NO RESPONSE	TOTAL -
E	My family member enjoys mealtimes.	2.78% 1	5.56% 2	13.89% 5	38.89% 14	22.22% 8	13.89% 5	0.00% 0	2.78% 1	36
	My family member can eat whenever they want.	5.56% 2	5,56% 2	5.56% 2	13.89% 5	30.56% 11	22.22% 8	0.00% 0	16.67% 6	36
6	My family member has enough variety in their meals.	0.00% 0	2.78% 1	2.78% 1	36.11% 13	50.00% 18	5.56% 2	0.00%	2.78% 1	36
	My family member receives their favourite foods.	0.00% 0	5.56% 2	25.00% 9	25.00% 9	11.11% 4	25.00% 9	0.00% 0	8.33% 3	36

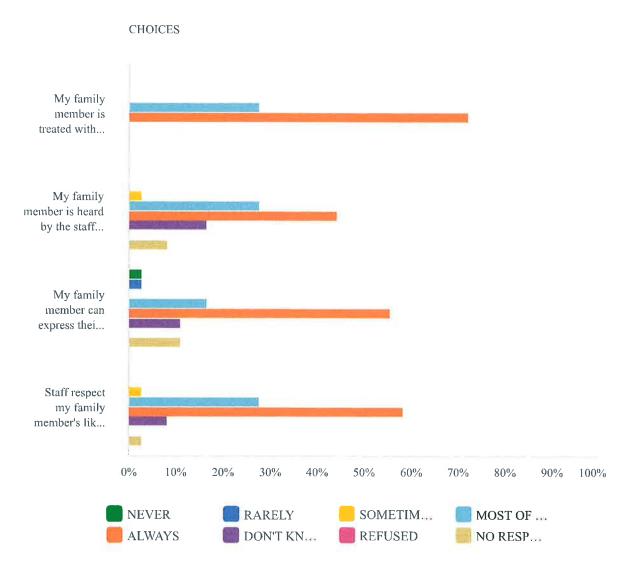
# Recreation/Activities: For each statement, please answer with one of the available choices.



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		NEVER -	RARELY -	SOMETIMES -	MOST OF THE TIME	ALWAYS -	DON'T KNOW =	REFUSED -	NO RESPONSE	TOTAL -
2	My family member participates in meaningful activities.	5.56% 2	11.11% 4	22.22% 8	30.56% 11	22.22% 8	5.56% 2	0.00%	2.78% 1	36
=	My family member has enjoyable things to do on the weekends.	0.00% 0	19.44% 7	30.56% 11	13.89% 5	8.33% 3	22.22% 8	0.00%	5.56% 2	36
	My family member has enjoyable things to do in the evenings.	2.78% 1	19.44% 7	16.67% 6	8.33% 3	11.11% 4	25.00% 9	2.78% 1	13.89% 5	36
4	If my family member wants, he/she can participate in spiritual programs of meaning.	2.78% 1	0.00% 0	11.11% 4	19.44% 7	41.67% 15	16.67% 6	0.00% 0	8.33% 3	36

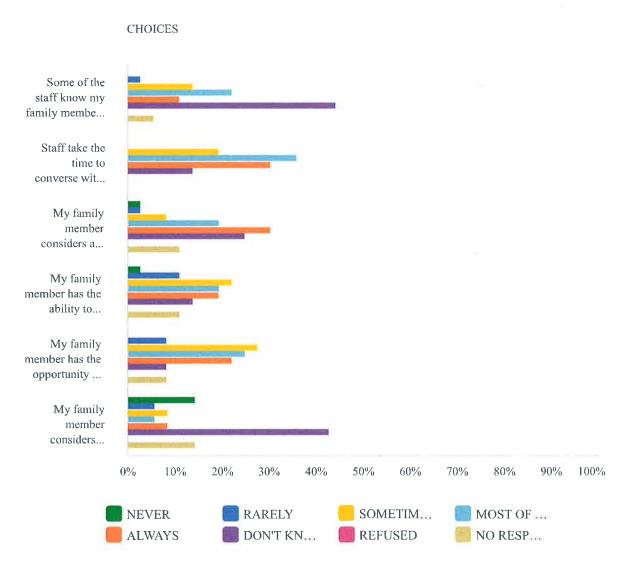
# Respect by Staff: For each statement, please answer with one of the available choices.



# CHOICES

	7	NEVER -	RARELY -	SOMETIMES -	MOST OF THE TIME	ALWAYS -	DON'T KNOW	REFUSED -	NO RESPONSE	TOTAL -
 My family member is treated with respect by the staff.		0.00%	0.00% 0	0.00%	27.78% 10	72.22% 26	0.00% 0	0.00% 0	0.00% 0	36
 My family member is heard by the staff in regards to personal decisions.		0.00% 0	0.00% 0	2.78% 1	27.78% 10	44.44% 16	16.67% 6	0.00%	8.33% 3	36
My family member can express their opinion without fear of consequences.		2.78% 1	2.78% 1	0.00%	16.67% 6	55.56% 20	11.11% 4	0.00% 0	11.11% 4	36
Staff respect my family member's likes and dislikes.		0.00%	0.00% 0	2.78% 1	27.78% 10	58,33% 21	8.33% 3	0.00% 0	2.78% 1	36

# Personal Relationships: For each statement, please answer with one of the available choices.

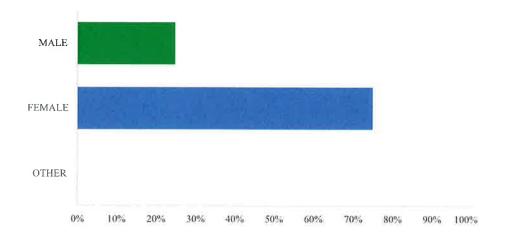


CHOICES	
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		5	NEVER -	RARELY -	SOMETIMES -	MOST OF THE TIME	ALWAYS -	DON'T KNOW	REFUSED -	NO RESPONSE	TOTAL -
<del></del>	Some of the staff know my family member's life story.		0.00% 0	2.78% 1	13.89% 5	22.22% 8	11.11% 4	44.44% 16	0.00%	5.56% 2	36
=	Staff take the time to converse with my family member.		0.00% 0	0.00% 0	19.44% 7	36.11% 13	30.56% 11	13.89% 5	0.00%	0.00%	36
=	My family member considers a staff member as their friend.		2.78% 1	2.78% 1	8.33% 3	19.44% 7	30.56% 11	25.00% 9	0.00%	11.11% 4	36
-	My family member has the ability to engage with like-minded residents.		2.78% 1	11.11% 4	22.22% 8	19.44% 7	19.44% 7	13 <sub>-</sub> 89% 5	0.00%	11.11% 4	36
TI.	My family member has the opportunity to build relationships with other residents.		0.00% 0	8.33%	27.78% 10	25.00% 9	22.22% 8	8.33% 3	0.00%	8.33% 3	36
=	My family member considers another resident here their close friend.		14.29% 5	5.71% 2	8.57% 3	5.71% 2	8.57%	42.86% 15	0.00%	14.29% 5	35

# Your family member's gender is:

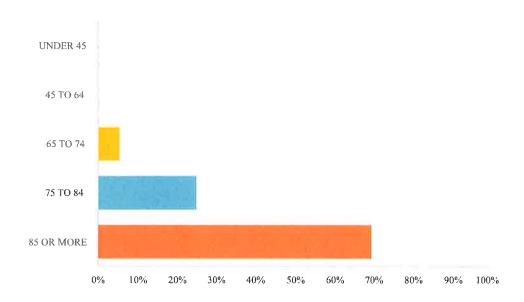
Answered: 36 Skipped: 0



ANSWER CHOICES	RESPONSES	2
- MALE	25.00%	9
- FEMALE	75.00%	27
- OTHER	0.00%	0
TOTAL		36

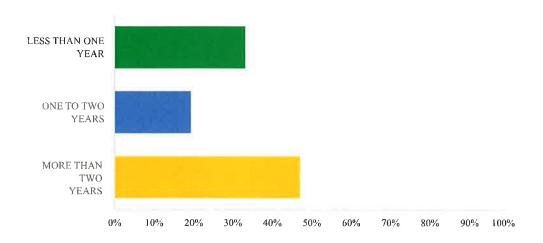
# Your family member's age in years is:

Answered: 36 Skipped: 0



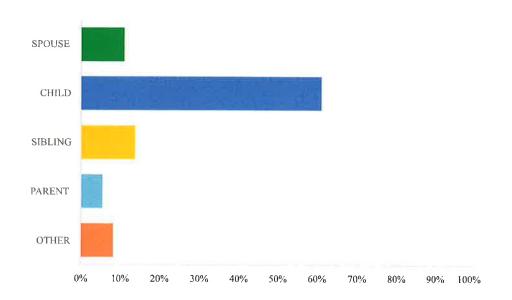
ANSWER CHOICES =	RESPONSES	-
UNDER 45	0.00%	0
45 TO 64	0.00%	0
- 65 TO 74	5.56%	2
- 75 TO 84	25.00%	9
85 OR MORE	69.44%	25
TOTAL		36

# Your family member has lived at Royal Terrace for:



ANSWER CHOICES	- RESPONSES	-
LESS THAN ONE YEAR	33.33%	12
- ONE TO TWO YEARS	19.44%	7
MORE THAN TWO YEARS	47.22%	17
TOTAL		36

# Your relationship to the resident is:

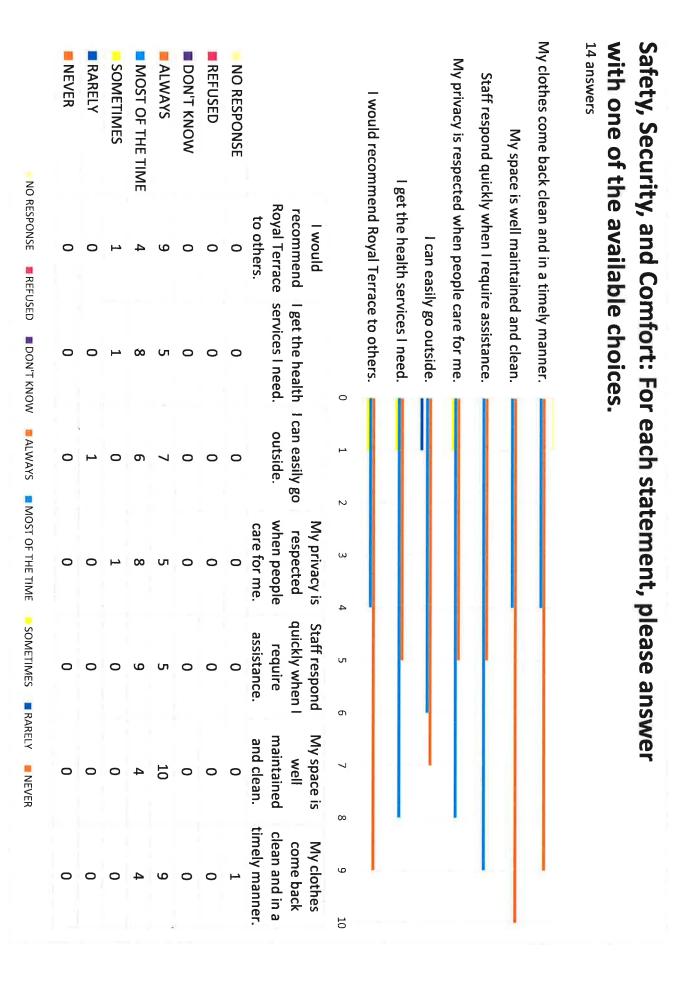


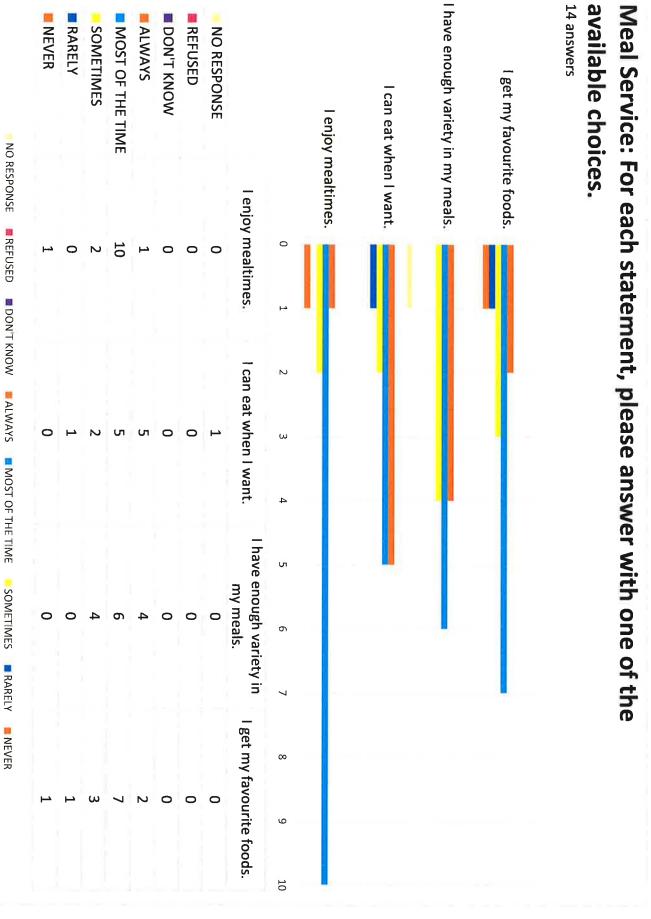
ANSWER CHOICES	= RESPONSES	
- SPOUSE	11.11%	4
- CHILD	61.11%	22
- SIBLING	13.89%	5
- PARENT	5.56%	2
- OTHER	8.33%	3
TOTAL		36

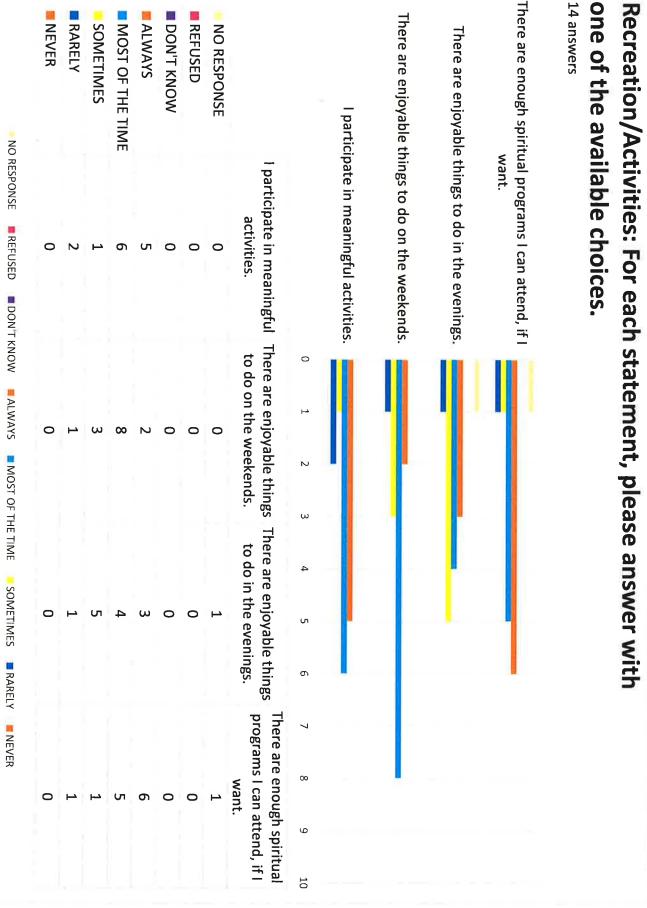
2024/2025

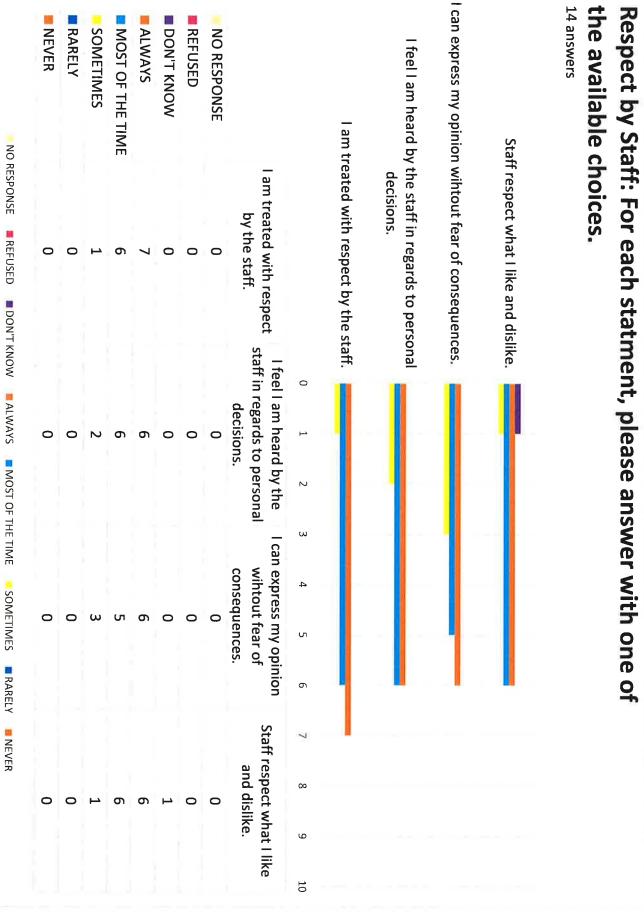
Resident Satisfaction Survey

Analysis

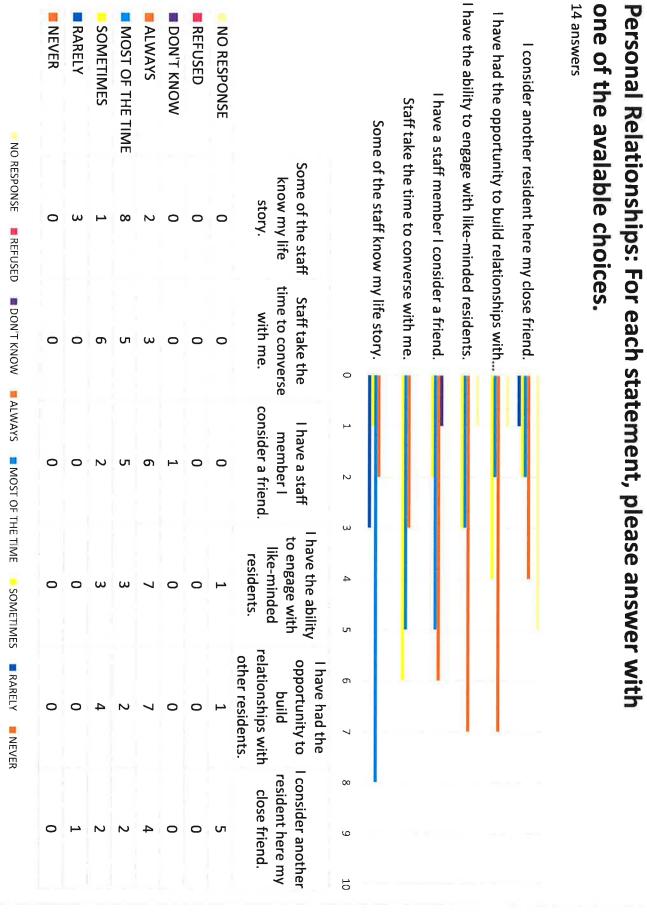


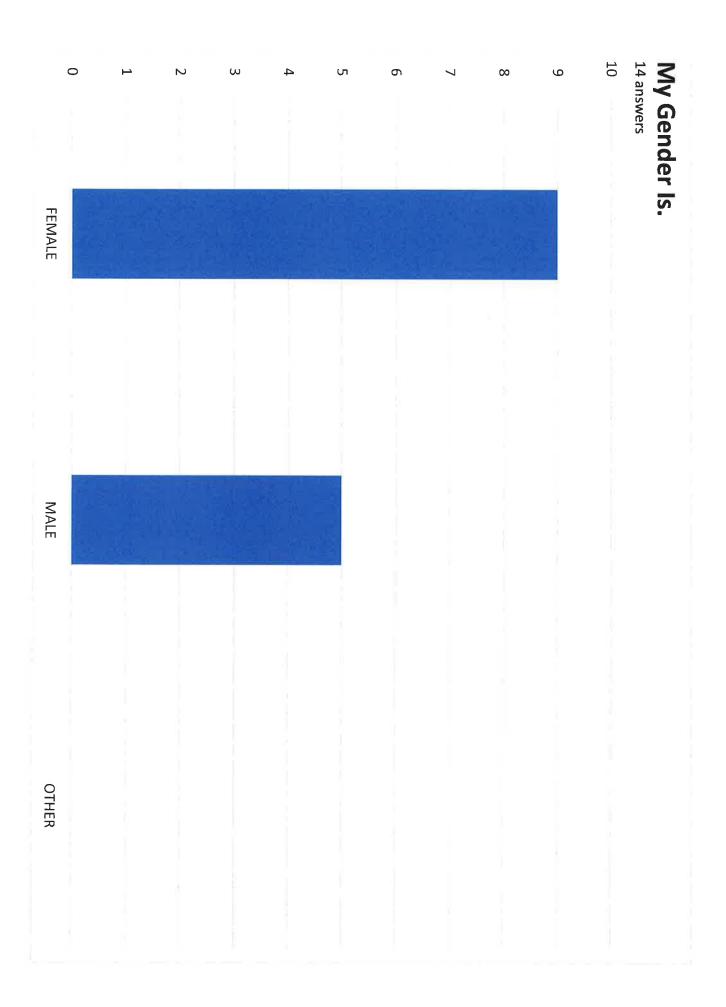




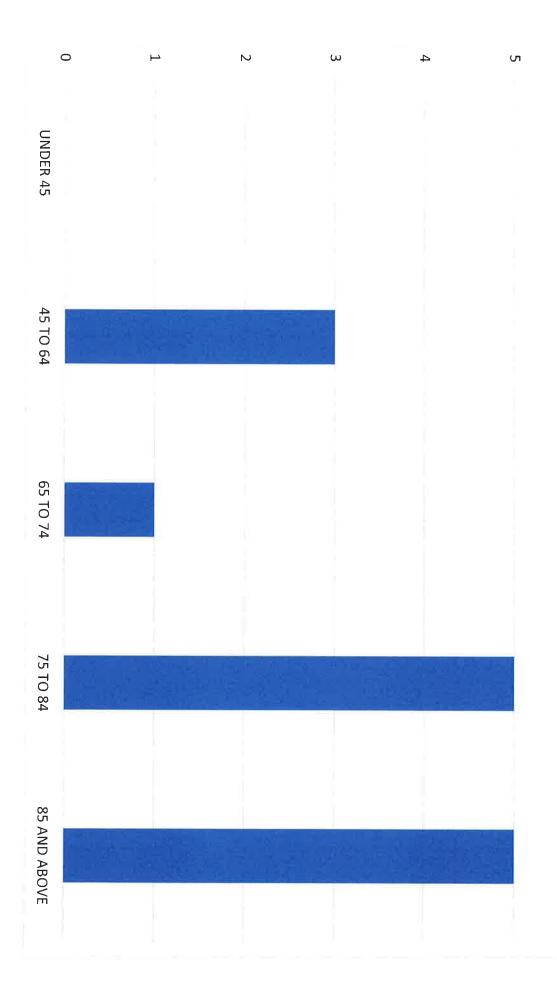


# one of the avalable choices.





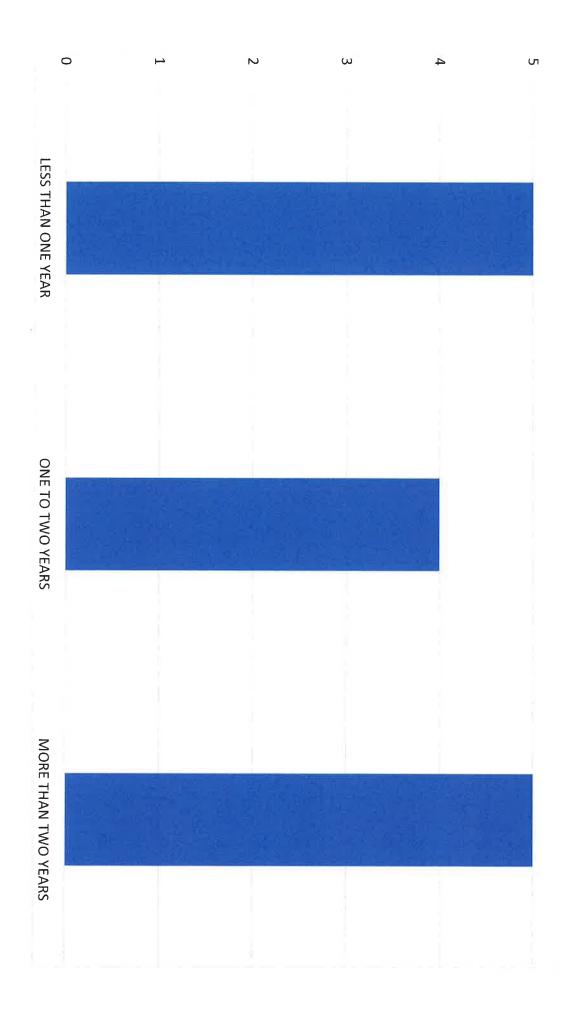






14 answers

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RESIDENT/ FAMILY SATISFACTION SURVEY RESULTS SHARED WITH:
MANAGEMENT – FEBRUARY 5, 2025
QIP/PAC – MARCH 18, 2025
RESIDENTS – FEBRARUY 24, 2025
STAFF – FEBRUARY 13, 2025
FMAILY - FEBRUARY 10, 2025
VOLUNTEERS – MARCH 5, 2025
OTHERS – APRIL 4, 2025