Tri-County Mennonite Homes

Continuous Quality Improvement Report

Designated Lead for Nithview Community LTC – Stacey Zehr – Executive Director

Introduction

Our mission, *Make Every Day Matter*, serves as a profound source of inspiration and motivation for all that we do. It propels us toward the achievement of our overarching vision, which guides Nithview in the following ways:

- **Anticipating the needs of seniors and individuals with developmental disabilities**, providing thoughtful responses through accommodations, care, and comprehensive support services.
- **Challenging and empowering** our residents, clients, staff, and volunteers to reach their full potential.
- **Leading the way in offering holistic care**, addressing the physical, spiritual, social, and emotional needs of our community.
- **Approaching challenges with innovation**, responding with curiosity, creativity, and the implementation of thoughtful solutions.
- **Expanding and enhancing all areas of service** to ensure the broader fulfillment of our mission and vision.

At the core of our approach are the values that define our culture at Nithview: compassion, caring, respect, trust, faith, stewardship, and a commitment to being community minded. These values are embraced by every member of our team, forming the foundation upon which we provide care and service.

Quality Improvement Plan

The Quality Improvement Plan (QIP) plays a crucial role in our ongoing planning and efforts to achieve the highest standards of care. It is designed to align with our mission, vision, and values, and to drive tangible outcomes in pursuit of our strategic objectives. Through this alignment, we ensure that we consistently deliver exceptional care, remain accountable to our residents and families, prioritize best practices and the highest quality standards.

Our 2024/2025 QIP focused on the following indicators:

Access and Flow – Rate of ED visits for modified list of ambulatory care-sensitive conditions

Equity – Percentage of staff (executive level, management or all) who have completed relevant equity diversity inclusion and anti racism education)

Patient Centred Experience – Percentage of residents responding positively to: “What number would you use to rate how well the staff listens to you?” and “I can express my opinion without fear of consequences.”

Patient Centred Experience - Pleasurable dining – Implementation of Meal Suite technology

Safety – Percentage of residents who fell in the 30 days leading up to their assessment.

Safety – Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment.

Our leadership team and members of our quality committee meet monthly to review progress in each focus of the QIP. Using tracking tools this data is recorded for our progress report at the end of the fiscal year.

Continuous Quality Improvement

Our Continuous Quality Improvement (CQI) Committee plays a pivotal role in managing risk, assessing outcomes, and guiding necessary strategic changes within the organization. Through this committee's leadership, we are able to continually refine our approach to care and ensure that we are responsive to emerging needs and challenges. Our review of Critical Incidents, as well as Concerns and Complaints at these meetings helps us to find the precipitating factors, recurring themes, identify risks, and implement strategies, policies and processes to reduce future incidents.

Our relationship with a diverse range of stakeholders, including our residents’ council, our family council, staff, external care partners and senior leadership is the basis of our quality improvement program. With their collaboration, we have strengthened our approach. The feedback through surveys, direct consultation, and statistical data informs the development of initiatives that address key priorities.

Among our many successes, we are particularly proud of being recognized as a *Best Practice Spotlight Organization (BPSO)*. This achievement highlights our unwavering commitment to evidence-based, standardized care across all aspects of resident care. Furthermore, we continue to find successes through the use of a standardized assessment tool.

Nithview home has made significant strides in enhancing behavioral supports for residents, particularly those living with cognitive impairments or mental health challenges.

One key achievement has been the implementation of tailored behavioral interventions that prioritize person-centered care. These interventions are designed to understand the underlying causes of personal expressions and provide appropriate strategies to manage them, thus improving residents' quality of life. Additionally, staff have received specialized training in recognizing and responding to behavioral triggers, ensuring more compassionate and effective care. The integration of multidisciplinary teams—including behavioral specialists, and registered psychotherapist—has further strengthened our ability to develop individualized care plans that support both the emotional and psychological well-being of residents. This holistic approach has led to a reduction in the use of restrictive practices and medications, fostering a more supportive and dignified living environment for all residents.

Through these initiatives, Nithview continues to demonstrate its dedication to providing exceptional, research-driven care that prioritizes the well-being and dignity of our residents.

Access and Flow:

Our quality improvement initiative aimed to reduce the overall number of Emergency Department (ED) visits. While we did not achieve the target reduction in ED transfers, Nithview has remained below the provincial average, with a noticeable reduction in visits overall. To reduce the number of non-essential emergency department visits in our long-term care setting, we are implementing a quality improvement initiative focused on proactive care and efficient management of residents' health needs. This will be achieved through monthly reviews of resident transfers to the emergency department, which will help identify patterns and determine the underlying causes of avoidable visits. These reviews will be followed up in ongoing leadership meetings, following which key stakeholders—including medical, nursing, and care staff—will collaborate to address any issues and develop strategies to improve care and prevent unnecessary transfers. The leadership team will assess whether the care plan for each resident is comprehensive and if any adjustments, such as earlier interventions or changes in care protocols, are needed. Additionally, we will provide ongoing education and training for staff on best practices in managing chronic conditions, recognizing early signs of complications, and utilizing in-house resources before resorting to emergency department visits. By continuously monitoring progress, engaging leadership, and refining care strategies, we aim to enhance resident outcomes and reduce unnecessary emergency department visits, ultimately improving the overall quality of care provided.

The interdisciplinary team regularly reviews the goals of care at several crucial times: the six-week admission care conference, annual care conference, and whenever a significant

change in health status occurs, triggering a special care conference. By discussing and documenting health status and care goals at the time of admission, our team is better equipped to identify early changes in a resident's condition. This proactive strategy supports informed decision-making by staff, families, and residents, which ultimately contributes to a reduction in avoidable ED transfers. Our goal is to ensure that our team has the most accurate and up-to-date information about each resident, enabling us to provide the most appropriate and effective care.

Equity and Indigenous Health

As part of our ongoing commitment to quality improvement, our organization is dedicated to enhancing equity and fostering cultural safety for all individuals, with a particular focus on Indigenous health. To achieve this, we are implementing a comprehensive initiative aimed at increasing awareness of cultural diversity within our home and promoting a deeper understanding of the people we care for and the team members we work alongside. This initiative includes integrating equity, inclusion, diversity, and anti-racism education across all levels of care. We are focusing on educating our team about the diverse cultural backgrounds of both our residents and each other to create an environment of respect and understanding. Through targeted training and promoting a culturally sensitive calendar of events, our goal is to equip all staff, from frontline caregivers to leadership, with the knowledge and skills necessary to provide culturally safe care for all peoples and promote inclusivity for everyone. We will explore the historical and contemporary challenges faced by diverse communities, address unconscious biases, and work actively to dismantle systemic barriers. Ultimately, our goal is to foster a healthcare environment where every individual—regardless of their cultural background—feels respected, valued, and empowered to receive the highest standard of care. This approach aligns with our broader strategy of creating a culture of equity and inclusion, ensuring that all residents and staff are able to thrive in a community that is both culturally sensitive and appropriate to their unique needs.

Patient/Client/Resident Experience

In our long-term care home, we recognize the invaluable role that resident, family, and caregiver feedback play in driving continuous improvement in the quality of care we provide. Moving forward, we will systematically incorporate information gathered from resident feedback surveys, family feedback surveys, and other care experience feedback into our improvement activities. This feedback will be reviewed regularly by our leadership

and care teams to identify key areas for enhancement. Based on this feedback, we will implement targeted changes in care practices, staff training, and communication strategies to address concerns and enhance the overall experience for residents and their families. To this end, we are introducing the Gerry App as a means of streamlining communication across all care partners to better provide consistent and timely information. Additionally, we will establish clear channels of communication to ensure that residents and families feel heard and involved in their care journey, while fostering a culture of responsiveness and accountability. By integrating this valuable input into our quality improvement initiatives, we aim to continuously elevate the standard of care, making it more personalized, compassionate, and responsive to the evolving needs of our residents.

Resident and Family/Caregiver Satisfaction survey 2024:

February 28, 2024 – Met with Residents Council for the development of the Survey. On this date, we also reached out to Family Council Chairperson for their input.

April 16, 2024 – Survey was rolled out, with closing date of April 30, 2024.

May 21, 2024 – Reviewed results with Leadership Team

June 5, 2024 - Reviewed survey results with the Residents' Council. On this date we sent an invitation to families to review the satisfaction survey results at a virtual meeting. A link to the results was provided in this invitation.

June 17 – The home held a virtual meeting where the results of the survey were reviewed with Family Council.

July 17 – Quarterly Continuous Quality Improvement Committee met to review Satisfaction Survey Results

Some Improvements initiated because of the survey:

- Resurrection of Tea Room – September 2024
    - Tea Room is happening once a week and residents have expressed their appreciation
    - Increased our volunteer base to accommodate Tea Room and other spiritual care programs
- In response to satisfaction in Residents Choices, Direct Care and Care Team, Nithview identified a need to support Direct Care staff in their roles, by supporting residents through admission process, and education and monitoring of direct care staff.
    - Resident Life Coordinator began January 2025 – with support to ensure a smooth transition into LTC, this role connects with families prior to

admission and maintains relationship throughout their loved one's stay. This role also supports mobilizing resources beyond nursing services and services offered within the home.
    - PSW Quality Assurance Coordinator began April 2025 - will provide enhanced PSW orientation, monitoring and follow up education to promote resident satisfaction with the care they receive.
    - In response to satisfaction of the medical care, Nithview obtained the services of another physician to support the home.
- In response to satisfaction with the incontinence products provided by the home the LTC home worked with the provider to support residents and ensure they had the correct product for their need. Meeting with individual residents and their families, the provider suggested and provided samples of alternate products that may suit the resident better. The provider provided roll out education in April 2024 and then further education in September 2024.

Other initiatives that were implemented because of family and resident feedback were the implementation of a Resident Appointment/Outings Process. This process has helped communication between the home and families and promote a positive experience for them.

Resident and Family/Caregiver Satisfaction Survey 2025:

Survey was launched March 11 with closing date of April 1, 2025

February 5, 2025 - Met with Residents Council for their input in development of the survey

May 7, 2025 – Results of Survey received

Ongoing review with Leadership team, CQI Committee, Residents' Council and Family Council is happening and will result in creation of the Action Plan.

Review of Satisfaction Survey Results with Family Council Representative scheduled for May 27, 2025.

Review of satisfaction Survey with Residents' Council is scheduled for June 4, 2025.

Meeting with Quality committee to review results is scheduled for July 23, 2025

Comments from the survey:

The music program is the best part of Recreation Program.

The Tea Room has been a welcome place for residents to gather and meet other people.

The individual staff members are caring individuals who treat my family member with love care and respect, and I am indebted to them.

The staff are so kind and compassionate, warm and caring.

The care staff has been more consistent recently and I find that helpful as they are more familiar with my loved one's need.

My loved one is very happy with the menu food

Special meals on holidays really make them excited

Provider experience

Nithview has transitioned from an outsourced human resources function to developing a robust in-house HR department. This shift enables focused recruitment efforts to attract top talent that aligns with our corporate values and organizational culture. As part of this evolution, we are enhancing leadership development, implementing a performance management program, and refining compensation, pay, and total rewards strategies. We also place a strong emphasis on employee engagement and retention, utilizing exit interviews and employee engagement surveys to gather valuable feedback and continuously improve the work environment.

In March 2025, TCMH launched an Employee Satisfaction Survey. The survey closed on April 1, 2025. There were 115 respondents out of a possible 252.

The most frequently mentioned area for improvement was scheduling. Employees indicated they would appreciate more flexibility to switch shifts, having scheduling department on each site, and being able to see more than 3 weeks of a schedule ahead. Employees also expressed appreciation and desire to be informed of what is happening both divisionally and at the corporate level. Appreciation was also expressed for opportunities for education and development and most respondents agreed that they felt supported by their manager. In both resident and employee responses, there were comments that expressed the difficulties in providing exemplary care within the current staffing structure.

Despite demands of the role, the survey relayed that people enjoy and find purpose in their roles. One respondent commented "Everyone works as a team supporting and respecting each other, which helps our residents to receive comprehensive care.

Safety

Nithview is dedicated to creating and sustaining a culture of safety through a comprehensive falls-prevention program aimed at reducing and preventing patient safety

incidents. The program includes regular falls risk assessments for all residents, with individualized care plans developed to address identified risks. These plans may involve strategies such as mobility aids, environmental modifications, and staff training to ensure that all team members are equipped with the knowledge to recognize fall risks and respond appropriately. We also engage residents in regular exercise programs that focus on improving strength, balance, and coordination, which are key factors in reducing the likelihood of falls. Additionally, family members and care partners are educated on how to support their loved ones in maintaining a safe environment and are encouraged to actively participate in the program.

To sustain a culture of safety, we foster open communication between staff, residents, and families regarding falls prevention. Incident reports are thoroughly reviewed, with findings used to continuously refine our approach to care and safety. Staff members receive ongoing training and education on the latest best practices in falls prevention, and interdisciplinary team meetings provide opportunities for collaborative problem-solving and sharing of insights. By promoting awareness, providing proactive interventions, and consistently evaluating our efforts, we aim to prevent falls and enhance the overall safety and well-being of our residents.

Nithview is committed to reducing the use of antipsychotic medications, recognizing the importance of exploring alternative approaches to care that prioritize the well-being and quality of life of our residents. We understand that while antipsychotics may be necessary in certain situations, they should not be the first line of treatment, especially when there is no formal psychosis diagnosis. As part of our commitment, we actively monitor and review residents' medication regimens, working closely with our medical team to identify opportunities for gradual reduction or discontinuation of antipsychotics when appropriate. We also emphasize non-pharmacological interventions, such as personalized care plans, behavioral strategies, and enhanced social and recreational activities, which can often address underlying symptoms such as agitation or anxiety. Our goal is to ensure that residents receive the most effective, individualized care possible, using the least amount of medication necessary, and fostering an environment that supports their physical, emotional, and psychological well-being.

At Nithview, we faced a challenge with a high number of residents exhibiting personal expression that posed significant risks to both themselves and others. In these situations, some residents required 1:1 staff support at all times to mitigate these risks. These critical incidents demanded considerable time and effort to manage and ensure the safety of everyone involved. Unfortunately, this situation resulted in a higher-than-expected number

of residents receiving antipsychotic medications despite not having a formal psychosis diagnosis.

When appropriate, we aim to discontinue through reductions the use of antipsychotic medications. The immediate goal is to reduce their use whenever possible. To support this initiative, Nithview collaborates closely with our Medical Director and Medi-System Pharmacy, residents and care partners to ensure that every opportunity for reducing antipsychotic use is explored. Moving forward, Nithview will continue to focus on decreasing the percentage of residents on antipsychotics and improve our care practices to better meet their needs.

Palliative Care

At Nithview, we are committed to delivering high-quality palliative care that prioritizes comfort, dignity, and respect for the individual needs of each resident. Central to this commitment is the active involvement of care partners—family members, close friends, and others who play a key role in the resident's well-being. We ensure that care partners are engaged in regular care planning meetings, where they can contribute valuable insights into the resident’s preferences, values, and goals of care. We also offer opportunities for care partners to participate in educational sessions about palliative care, pain management, and symptom relief, empowering them to support their loved ones effectively during this critical time.

In addition to care partner engagement, we prioritize resident education to ensure that each person is well-informed about their care options and decisions. Residents and families are encouraged to actively participate in discussions about their end of life care plans, and we provide resources to help them understand what to expect during this phase of care. Our home also maintains a strong commitment to providing supportive care through a compassionate, multidisciplinary team of healthcare professionals. This team includes doctors, nurses, social workers, chaplains, and therapists, all working together to address the physical, emotional, and spiritual needs of our residents. By fostering an environment of open communication, education, and support, we aim to create a peaceful and compassionate experience for residents and their care partners throughout their palliative journey.

Population Health Management

Nithview is deeply appreciative of the valuable partnerships that contribute to enhancing resident experience, safety, and care. Among these partnerships, we are especially grateful for our collaboration with NLOT, who provides ongoing education and support. This

specialized training is essential for equipping our team with the skills needed to provide optimal care and treatment, particularly in situations where hospital transfers may be avoided. The expertise gained through this training ensures that our registered staff are equipped with the most current, evidence-based methods of care, even in areas where additional competencies may be required. Additionally, the guidance provided by the Best Practice Spotlight Organization (BPSO) supports our continuous use of best practice guidelines, ensuring that we adhere to the highest standards of care for our residents.

Our pharmacy team plays a critical role in resident care by overseeing medication management and contributing to various committees, including the PAC and Quality committees. They monitor important metrics such as antipsychotic use, medication errors, and prescription patterns, collaborating closely with our physicians and medical leads to optimize care delivery. We partner with a variety of health service organizations, including hospitals, home care agencies, primary care providers, and community-based health services, to ensure a seamless continuum of care for our residents. These partnerships allow us to coordinate medical treatments, access specialized services, and ensure that our residents receive the right care at the right time.

Especially important is our strong partnership with the Resident Council, which is instrumental in driving meaningful dialogue with leadership. The residents are highly engaged and actively participate in meetings to provide valuable input on initiatives aimed at continuously improving life at Nithview. This collaboration fosters a sense of ownership and a shared commitment to making Nithview the best it can be. Additionally, our Family Council, which is in a period of leadership transition, is working on a strategic plan to enhance its impact. We ensure that families are kept informed and engaged by providing timely updates on changes, activities, and developments through regular email communications, reinforcing transparency and fostering a strong sense of community.

2025/2026 QIP Initiatives:

Access and Flow – Rate of ED visits for modified list of ambulatory care-sensitive conditions – This will be achieved through tracking and follow-up with staff to learn from our experiences.

Equity – Percentage of staff (executive level, management or all) who have completed relevant equity diversity inclusion and anti racism education). Nithview is committed to acknowledging the various cultures and ethnicities of those who live and work here. This will be done through awareness activities and events throughout the year. We are also committed to providing spiritual assessment and share this information to team members, enabling them to provide person centred care.

Patient Centred Experience –

- Percentage of residents responding positively to: “What number would you use to rate how well the staff listen to you?” and “I can express my opinion without fear of consequences.” These questions will be surveyed throughout the year and respond to any concerns arising, to ensure residents can answer positively.
- The Gerry App will be rolled out and we will be monitoring the residents’ and families satisfaction with the change in method of communication. We will be supporting all residents and their families to participate in this.

Safety – Percentage of residents who fell in the 30 days leading up to their assessment. This will be done through daily resident rounding meetings where risk concerns for residents arise and are discussed.