

CONTINUOUS QUALITY IMPROVEMENT INITIATIVE REPORT

Post Inn Village Long-Term Care Home 2024-2025



EXECUTIVE SUMMARY

The 2024–2025 Continuous Quality Improvement (CQI) Report outlines Post Inn Village's key priorities, progress, and outcomes aimed at enhancing resident care and experience. Grounded in the IHI Model for Improvement and supported by Lean and Kaizen principles, the home focused efforts across four strategic areas: Access and Flow, Equity, Safety, and Experience.

Notable initiatives this year included dementia-friendly renovations, enhanced continence care, staff training, improved programming, and new family onboarding supports. Resident and family feedback directly informed targeted actions around engagement, communication, and environment.

Looking ahead, the 2025–2026 priorities include improving admission and discharge workflows, expanding dementia education through "Dementia Dialogues," and participating in ISMP Canada's medication safety initiative—ensuring alignment with Halton's regional Services for Seniors Strategic Plan.

Post Inn Village remains committed to safe, person-centered, and continuously improving care.

ABOUT POST INN VILLAGE LONG-TERM CARE

Post Inn Village is a 228 bed Long-term care home located in the Oakville community. Owned and operated by the Regional Municipality of Halton, the home has a strong history and commitment to continuous quality improvement. Post Inn Village is recognized as a Long-Term Care Best Practice Spotlight Organization® (LTC-BPSO®) by the Registered Nurses' Association of Ontario (RNAO) and is fully accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) International.

In January 2025, Post Inn Village proudly celebrates 20 years of exemplary service to its residents and the community. At Post Inn Village, our Philosophy of Care is centered on person-centered care, fostering meaningful connections while respecting each resident's individual needs, values, and preferences. Our Mission is to provide compassionate, person-centered care that upholds dignity, respect, and quality of life for all residents.

MISSION, VISION AND VALUES

MISSION

To provide person-centered care that promotes dignity, respect, and quality of life.

VISION

To achieve excellence in the provision of person-centered care and service that ensures the safety, comfort, dignity, and well-being of each person served.

PHILOSOPHY OF CARE

Our philosophy of person-centered care focuses on making meaningful connections while ensuring residents' and clients' individual needs, values, and preferences guide decision making and personalized care

CORE VALUES



CONTINUOUS QUALITY IMPROVEMENT

Continuous Quality Improvement (CQI) is a structured, ongoing approach that enables teams to regularly assess how they deliver care, identify opportunities for improvement, test new strategies, and measure whether those changes lead to better outcomes.

Post Inn Village's CQI framework is anchored in the Institute for Healthcare Improvement (IHI) Model for Improvement, a globally recognized methodology for achieving meaningful, sustainable change in healthcare.

This model starts with three key questions;

- What are we trying to accomplish?
- How will we know that a change is an improvement?
- What change can we make that will result in improvement?

These questions guide the use of the Plan-Do-Study-Act (PDSA) cycle, a rapid-cycle testing method used to trial changes on a small scale, study the results, and refine approaches before broader implementation.



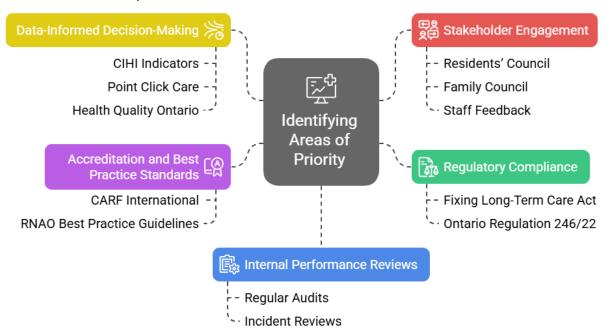
In addition, Post Inn Village applies other proven CQI tools and methodologies, including:

- **Lean principles**: Focus on eliminating waste and improving value—like reducing time between a call bell and staff response.
- **Kaizen**: A mindset of continuous, incremental improvement from all team members—not just leadership.

Identifying Areas of Priority

Halton Region's LTC homes are committed to delivering safe, person-centered, and continuously improving care. This commitment is embedded in our strategic and operational plans and guides quality improvement across all programs and services.

To identify priorities for 2024–2025, Post Inn Village applies a multi-source approach that aligns regulatory expectations with performance data and feedback from residents, families, staff, and partners.



This approach includes:

- Legislation and regulatory compliance: We ensure all improvement initiatives are aligned with the Fixing Long-Term Care Act, 2021 and Ontario Regulation 246/22, supporting both compliance and strategic advancement.
- Accreditation standards and best practices: Our operations follow CARF International accreditation standards and RNAO Best Practice Guidelines (BPGs). These frameworks promote evidence-informed practices.
- Data-informed decision-making: We analyze performance data from multiple sources—CIHI indicators, Point Click Care (PCC), Health Quality Ontario (HQO) benchmarks, and internal program evaluations—to identify trends, monitor outcomes, and target areas for improvement.
- Internal performance reviews: Regular audits, incident reviews, and quality assessments help us proactively address risks or inefficiencies.
- **Stakeholder engagement**: Feedback from Resident Council, Family Council, staff, and external partners—plays a vital role in shaping our quality priorities.

Quality Improvement Plans (QIP's)

Our annual Quality Improvement Plan (QIP) reflects the outcome of this priority-setting process and is developed in alignment with Health Quality Ontario's provincial priorities. The 2024–2025 QIPs focuses on four core areas: Access and Flow, Equity, Safety, and Experience. These areas are critical to advancing the quality of care and services delivered in our home and support multi-year efforts to build capacity, responsiveness, and resident satisfaction.

Figure 1: 2024/2025 QIPs Critical Areas for Improvement				
Priority Area	Priority Indicator(s)			
Access and Flow	 Reduce the number of potentially avoidable visits to the Emergency Department. 			
Equity	 Improve on percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education. 			
Safety	 Reduce the percentage of residents on antipsychotic medication without a diagnosis of psychosis. Reduce the percentage of LTC home residents who fell in the 30 days leading up to their assessment. 			
Experience	 Improve rating on how well staff listen to residents. Improve rating on "I can express my opinion without fear of consequences." 			

Performance Monitoring & Measurement

At Post Inn Village, performance monitoring is a cornerstone of our quality improvement strategy. We rely on a robust system of measurement and accountability to ensure that care is not only delivered, but continuously assessed and improved based on outcomes, trends, and stakeholder input. We monitor and evaluate quality across several domains using multiple data sources. This allows us to identify areas of strength, address emerging risks early, and guide evidence-informed decision-making. Key Monitoring Mechanisms Include:

- Home- and program-level performance indicators (clinical and non-clinical)
- Annual Quality Improvement Plan (QIP) indicators
- Incident and risk data.
- Satisfaction and experience survey results

Public Reporting and Transparency

Post Inn Village is committed to transparency and contributes to public reporting of resident outcomes through the Canadian Institute for Health Information (CIHI). These performance indicators help benchmark our progress against provincial averages and drive sector-wide learning.

During the 2024-2025 reporting period, Post Inn Village outperformed provincial benchmarks across several key quality indicators. These results reflect the home's ongoing investment in staff training, process improvements, and adherence to best practice guidelines.

Figure 2: Post Inn Village CIHI Performance Indicators 2023-2024				
Quality Indicators	Ontario	Post Inn Village		
Falls in the Last 30 Days	16.6%	13.5%		
Worsened Pressure Ulcer	2.3%	0.5%		
Potentially Inappropriate Use of Antipsychotics	20.5%	13.5%		
Restraint Use	1.8%	0%		
Worsened Depressive Mood	20.8%	14.1%		
Experiencing Pain	4.6%	3.4%		
Experiencing Worsened Pain	9.0%	5.7%		

Data Source: CIHI Public Reporting Site, Your Health System. The data for 2024-2025 cycle will be available July 2025.

Services for Seniors Strategic Plan (2025–2027)

Post Inn Village's quality improvement priorities are aligned with the Halton Region Services for Seniors Strategic Plan (2025–2027), which sets the direction for delivering person-centered, innovative, and sustainable care for older adults across the Region. This strategic plan is built on Halton Region's broader vision for growth, well-being, equity, and responsible service delivery.

The Services for Seniors Strategic Plan was developed through extensive engagement with residents, families, staff, and community partners. This collaborative process helped define clear priorities based on what matters most to those who live and work in our homes. The plan is structured around four key themes that reflect both organizational and community values:



Post Inn Village's CQI efforts—including the development of Quality Improvement Plans (QIPs), dementia care initiatives, and resident engagement strategies—are aligned with these strategic pillars. This alignment ensures that the home's local quality priorities are not only responsive to resident needs but also integrated into Halton Region's long-term goals for population health, innovation, and system resilience.

COMMUNICATION STRATEGY

Post Inn Village follows Services for Seniors Communication Plan that is reviewed annually to ensure timely, accessible, and transparent communication with residents, family care partners, and staff. The communications plan outlines the strategies used to distribute communications to various stakeholders, including residents, family care partners, and team members. Services for Seniors utilizes both print and digital communications to maximize accessibility for stakeholders.

Resident & Family Communication

We use monthly newsletters, town halls, memos, posters, and email alerts (via iceAlert) to share updates. Information is regularly presented at Resident and Family Council meetings, which also serve as key forums for gathering feedback and discussing quality improvement initiatives.

Team Communication

Team members receive updates through newsletters, departmental meetings, huddles, memos, CCTV, ICE alerts, town hall meetings and urgent postings via the workforce management app. These platforms ensure staff are aware of clinical updates, safety issues, and CQI priorities.

Feedback & Survey Engagement

Feedback is collected through:

- Annual Resident and Family Experience Surveys
- Resident and Family Councils
- Program-specific surveys and direct consultations

The Resident and Family Experience Surveys are analyzed and compared year-overyear to quantify which areas Post Inn Village has been able to improve during the previous years, as well as provide a benchmark to determine priority targets for improvement in the coming year. The home creates Action Plans for priorities identified cross-divisionally, as well as priorities specific to the local home setting. Resident and Family Care Partners are consulted regarding the proposed Action Plans to ensure alignment with their experiences and expectations.

RESIDENT AND FAMILY ENGAGEMENT

Resident Family/Caregivers Experience Survey

At Post Inn Village, we conduct annual resident and family satisfaction surveys as part of our commitment to providing high-quality care. These surveys are a cornerstone of our engagement with the residents, their families, and the caregivers we serve. The feedback we gather is invaluable as it helps us identify what we do well and potential areas for improvement and reinforces our commitment to enhancing the quality of life within our home.

Survey Administration and Participation

The annual Resident and Family Experience Survey was conducted between August 6 – September 9, 2024. To accommodate all participants, we offer the survey in both digital and print formats. We encourage a high participation rate by actively promoting the survey through various channels such as our monthly newsletters, town hall meetings, and resident and family council meetings.

Results Dissemination and Discussion

We analyzed this year's survey results and compared them with previous years to track progress and identify areas for improvement.

Residents and Families:

- Results were posted in the home on November 20, 2024, so residents and families could easily view them.
- They were also discussed with the Resident Council on November 25, 2024, and the Family Council on December 21, 2024.
- An updated action plan, developed based on the priority areas identified through the survey, outlining key initiatives for 2025 and their timelines, was shared with Family Care Partners during a townhall meeting on February 24, 2025, and distributed electronically.

Staff:

 Staff were informed of survey results and planned initiatives through departmental meetings, newsletters, digital bulletins, and a general staff townhall on November 14, 2024.

These discussions ensured that everyone—residents, families, staff—had a shared understanding of what's working well and where we need to improve. We're committed to acting based on feedback and making meaningful changes that reflect the needs of our residents and those who care for them.

2024 Survey Results



94% Residents are satisfied with overall care and services received in the home



94% Families are satisfied with care and services their loved one receives



84% Residents are are satisfied with the Long-term care as a place to live



94% Families are satisfied with the Long-term care as a place to live



95% Residents would recommend the home to others



96% Families would recommend the home to others

Some highlights collected from the survey include:

- The majority of residents and families express satisfaction with the cleanliness (97% resident, 91% family) safety and security (97% resident, 100% family) of the home
- The majority of respondents express satisfaction with Regional staff interactions at Post Inn Village (range between 80% and 94%).
- Residents and families are highly satisfied with the continence care services (91% resident, 85% family) and products (85% resident, 89% family) provided at the homes.
- Residents are highly satisfied with the food service in the dining room (92% positive rating). There has been a 17% increase in the positive rating in comparison to 2023.

Priority Areas

Survey results were analyzed to identify priority areas to focus our quality improvement work for the coming year. The criteria for identifying priority areas were responses that were below 80% or a Year over Year decrease of 9% or more.

Divisional Priorities

- Improve the quality of external services, including foot care, eye care, dental, and physiotherapy.
- Improve satisfaction with the long-term care environment around accessibility and home-like environments.
- Improve satisfaction around variety and quality of food

 Review current evening and weekend programs to ensure they meet the needs of residents

Post Inn Village Priority Areas:

- Review programs and activities offered in the home (scored well overall, however noted a significant change in resident satisfaction compared to 2023).
- Improving satisfaction with care provided by personal support workers and nursing staff (overall satisfaction with care provided was high, however we noted a significant change in comparison to 2023 results).
- Increase opportunities to participate in resident care conferences.

The following table showcases key outcomes from the satisfaction surveys and their associated action items aimed at achieving the set objectives.

AREA OF FOCUS	KEY ACTIONS	COMPLETION TIMELINE
Opportunities to Participate in Resident Council	 Update all home area boards monthly with resident council posters and previous minutes. Include resident council brochures in all new resident welcome bags; make extras available on all floors. Provide each resident with a one-page resident council agenda summary emphasizing the value of their input. 	Start Jan 2025, continue throughout 2025
Amount of Programs Offered	 Ensure staff scheduling allows one staff to run group programs while the other delivers small group sessions when two are present on a floor. Engage volunteers and students to support additional programming. Encourage families and residents to attend programs on other floors to increase engagement. Written formats to notify them will be used. 	30 th August 2025
Variety of Programs	 Conduct monthly program audits to minimize repetition and integrate fresh, engaging content. Pilot new program formats and encourage cross-team sharing of successful activities. Launch a "Program Exchange Day" in collaboration with partner Long-term care homes to diversify resident experiences. Adapt familiar activities for seasonal events (e.g., holiday-themed memory games, seasonal crafts). Leverage subscription resources (e.g., Golden Carers, Activity Connection) and maximize use of existing equipment. 	30 th August 2025

AREA OF FOCUS	KEY ACTIONS	COMPLETION TIMELINE
Resident Participation in Care Conferences	 Review and refine the admission process to consistently identify residents capable of participating in care conferences. Implement a standardized notification protocol for residents about the care conferences: initial letter one month prior, reminder one week before, and final notice one day prior. Revise family communication templates to highlight opportunities for resident participation, even in cases of questionable capacity and automate email reminders and follow-ups to ensure timely and consistent family engagement. 	30 th March 2025
Evening and Weekend Programming	 Modify evening scheduling to allow for multi-floor group activities when staffing is sufficient. Increase entertainment-based programs on evenings and weekends during periods of high staffing. Enhance promotion of after-hours programs through visually engaging posters and displays. Introduce recurring events (e.g., trivia nights, movie nights) to build resident familiarity and anticipation. 	30 th September 2025
Creating a Homelike Environment	 Complete renovation of 9 activity rooms with custom millwork, open shelving, fireplaces, and home-style furniture. Install valances and decorative features to enhance warmth and comfort in communal areas. Reinforce expectations for clutter-free, calming environments among staff through monthly team meetings. Finalize the installation of artwork and address flooring repairs where required. Conduct quarterly environmental audits and maintain a proactive painting and repair schedule for resident rooms and common areas. 	30 th March 2025 And throughout 2025

AREA OF FOCUS	KEY ACTIONS	COMPLETION TIMELINE
Satisfaction with PSW and Nursing Care	 Enforce structured break schedules with MORC oversight to ensure care continuity during staff downtime. Embed customer service standards into staff training and regular departmental meetings. Strengthen complaint resolution processes with timely follow-up by registered staff and managers. Institute daily care plan reviews to align care delivery with evolving resident needs and preferences. Foster shared decision-making by training staff to actively engage residents in care planning and goal setting. 	30 th March 2025 And throughout 2025
Continence Care and Product Satisfaction	 Integrate continence product satisfaction assessments into the care conference discussion framework. Partner with continence product vendors to deliver hands-on staff education on product usage and optimization. Provide re-education on best practices in continence care and bowel management protocols. Reinforce accurate and timely completion of the 3-Day Bladder and 7-Day Bowel Continence assessments to guide individualized care planning. 	30 th March 2025 And throughout 2025

Quality Improvement Initiatives 2024-2025

In 2024-2025 Post Inn Village achieved success in the following areas:

- Dementia Care Strategy Advancements: In alignment with our Dementia Care Strategy,
 Post Inn Village partnered with an architectural consulting firm specializing in dementiafriendly environments. Collaborating with staff, family members, and other key partners,
 the firm developed design options to enhance the secure home area's communal living
 spaces. This work in ongoing in 2025.
- Ongoing Dementia Care Education: The home continues to provide staff training on Gentle Persuasive Approaches (GPA) and Living the Dementia Journey, ensuring team members are equipped with best practices in dementia care. Training sessions are held on a monthly basis in 2024 for new and existing staff. This is and will be continued in 2025.
- Improved Family Support: A Family Orientation Program was introduced to support new residents and their families during the transition into the home. This initiative fosters relationship-building, information sharing, and open dialogue on key operational processes. The first meeting was held on August 24, 2024.
- Renovation of Activity Rooms: To maintain a warm and homelike environment, nine
 activity rooms were renovated in 2024 with custom millwork, built-in fireplaces,
 televisions, additional storage, and purposeful workstations for residents. New furniture,
 inviting conversation areas, and harvest tables enhance the overall ambiance of these
 communal spaces. The work to enhance these spaces was completed on December 15,
 2024.

Looking Ahead: Priorities for 2025-2026

In 2025, Post Inn Village has several planned initiatives to improve the resident and family experience:

- A comprehensive review and improvement of admission and discharge procedures will be conducted to ensure a seamless move-in experience for new residents and a wellcoordinated discharge plan for those transitioning out of the home. This work is scheduled to being Juen 1st 2025.
- Participating in the Strengthening Medication Safety in Long term care project through ISMP Canada to improve medication management practices and enhance resident safety.
- Continuation of the Dementia Dialogues for family care partners to provide education, support, and open discussions. These sessions offer opportunities to engage with the Dementia Care Lead and connect with other families navigating similar experiences. these sessions began in March 2024, and will be continued at a frequency of 2-4 sessions per month in 2025.

Home Quality Lead Contact Information

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