

Equity | Equitable | **Optional Indicator**

Indicator #4	Last Year		This Year		
	CB	100	100.00	--	NA
Percentage of staff (executive-level, management, or all) who have completed relevant equity, diversity, inclusion, and anti-racism education (St. Joseph's Villa, Dundas)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

We will look at differing education opportunities through Rottman EDI, CLRI, Fred Pryor portal and more.

**Process measure**

- We will keep track of staff members participating in each type of education

**Target for process measure**

- 100% mandatory training will be completed + 20% of staff will participate in additional in person training

**Lessons Learned**

The Villa recognizes the importance of advancing equity, diversity, and inclusion (EDI) to reduce disparities in outcomes for residents, families, and providers. A training plan was developed to identify appropriate EDI training for various staff roles. Staff received ongoing communication regarding additional specialized training opportunities. Furthermore, the Villa acknowledged that residents would benefit from improved care if staff had access to more socio-demographic information. As a result, the admission application now includes this data to enhance care delivery.

Experience | Patient-centred | Custom Indicator

Indicator #5	Last Year		This Year		
	CB	CB	NA	--	NA
To enhance timely palliative care for residents, caregivers and the team who often provide end of life support. We aim to increase early identification of residents who could benefit from a palliative care approach. (St. Joseph's Villa, Dundas)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

**Change Idea #1** ☒ **Implemented** ☐ **Not Implemented**

To increase the number of staff members to become comfortable with palliative care techniques/skills

**Process measure**

- HR will track how many staff participate in each education training

**Target for process measure**

- 20% of staff will participate in additional training

**Lessons Learned**

We recognize the importance of early identification and timely palliative care for our residents. Staff expressed concerns regarding their comfort level and the need for additional education on palliative care. Education sessions were provided to staff, and additional sessions were offered due to high interest and attendance (target-20% of staff, current performance- 72%). Following the training, staff reported feeling more confident in delivering palliative care and noted they were better equipped to provide enhanced care due to the increased knowledge gained.

**Change Idea #2** ☒ **Implemented** ☐ **Not Implemented**

To offer caregivers an opportunity to participate in palliative care training

**Process measure**

- Once sessions are planned, advertising to family members will begin and invite them to participate

**Target for process measure**

- We will complete 4 initiatives throughout the 24/25 QIP year

**Lessons Learned**

It is acknowledged that discussions about death and dying can be challenging for caregivers. Families were surveyed to gather feedback and suggestions on topics that would support and benefit caregivers in relation to palliative care. Several topics were recommended and presented, including: Ethics in Palliative Care Discussions, Medical Assistance in Dying (MAID), Symptom Management at End of Life, Anticipatory Grief, and End of Life Care in Dementia. (target- 4 sessions, Performance- 4). Families reported a high level of satisfaction with each educational session.

Indicator #1	Last Year		This Year		
	CB	CB	NA	--	NA
Better experiences result in better outcomes. Tracking and understanding experience is an important element of quality (St. Joseph's Villa, Dundas)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

To enhance the aesthetic appeal of 4 resident tub/spa rooms

Process measure

- One per quarter

Target for process measure

- Four tub rooms will be upgraded to have a spa like atmosphere

Lessons Learned

Based on feedback from residents and families, the Villa recognized the need to enhance the aesthetic appeal of resident tub/spa rooms. All four identified rooms were upgraded, and upon completion, staff received positive feedback. This success prompted discussions about further improving additional tub/spa rooms within the Villa

Change Idea #2 ☒ Implemented ☐ Not Implemented

To enhance the wayfinding signage at our three main entrances

Process measure

- 3 throughout the year

**Target for process measure**

- We will update the wayfinding signage at all three of our entrances for better navigation

**Lessons Learned**

The need for improved wayfinding signage was identified by residents, families, and visitors due to confusion regarding navigation within the building. In response, The Villa formed a wayfinding committee and consulted with companies for cost estimates and proposals. Recognizing the need for a phased implementation, the project was planned over an extended timeframe. Additionally, a graphic design student was hired to create signage and maps to enhance navigation and improve clarity at the three main entrances.

**Change Idea #3** ☒ Implemented ☐ Not Implemented

Encourage all departments/programs who report to the CQI committee will implement one resident and family focused initiative.

**Process measure**

- Encourage every program/department to implement one resident and/or family Initiative per year (as per CQI committee)

**Target for process measure**

- Greater than 70% of all programs/departments will implement one resident and/or family initiative

**Lessons Learned**

Resident and family engagement is essential to enhancing the quality of care. Actively involving them in all aspects of care and seeking their feedback is crucial, particularly in identified programs/departments. While obtaining feedback and engagement can be challenging, various teams have accommodated residents' and families' needs by clearly communicating initiatives, being flexible with time, commitment, and meeting locations and providing education on the matter as needed.

**Change Idea #4** ☒ Implemented ☐ Not Implemented

We will examine staffing levels on off peak hours and implement changes that will help to address staffing support

**Process measure**

- After reviewing reports in staffing gaps, initiatives will be determined to best address them

**Target for process measure**

- The Villa will ensure that two initiatives are implemented to help address staffing gaps throughout the year.

**Lessons Learned**

Residents and families identified staffing gaps that impacted support and care. In response, The Villa reviewed these gaps and implemented three initiatives: reintroduced weekend reception, aimed for 4 hours of direct care per day, and extended staffing hours. Families reported high satisfaction following the implementation of these changes.

Experience | Patient-centred | **Optional Indicator**

Indicator #2	Last Year		This Year		
	CB	80	93.10	--	NA
Percentage of residents responding positively to: "What number would you use to rate how well the staff listen to you?" (St. Joseph's Villa, Dundas)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

New Question will be added to our annual resident satisfaction survey as per HQO recommendations

Process measure

- Resident Surveys are conducted annually

Target for process measure

- Achieve >80% “good” and “very good” positive response rate

Lessons Learned

As recommended by HQO, The Villa added the question, "How well do you feel staff listen to you?" While resident responses were significantly positive, The Villa sought further feedback on how to enhance active listening and improve communication. This question will remain a part of the annual survey to ensure continued improvement.

Indicator #3	Last Year		This Year		
	CB	80	91.23	--	NA
Percentage of residents who responded positively to the statement: "I can express my opinion without fear of consequences". (St. Joseph's Villa, Dundas)	Performance (2024/25)	Target (2024/25)	Performance (2025/26)	Percentage Improvement (2025/26)	Target (2025/26)

Change Idea #1 ☒ Implemented ☐ Not Implemented

New Question will be added to our annual resident satisfaction survey as per HQO recommendations

Process measure

- Surveys are conducted annually

Target for process measure

- Achieve >80% “good” and “very good” positive response rate

Lessons Learned

As recommended by HQO, the Villa incorporated the question, "Do you feel you can express your opinion without fear of consequence?" Resident responses were overwhelmingly positive; however, the Villa sought further feedback and continues to provide additional forums for residents and families to share their opinions. Staff training includes components on active listening and service excellence. During council meetings, there is the review the Resident's Bill of Rights, emphasizing key rights such as being treated with courtesy and respect, and the right to participate in decision-making regarding their care and care plan development and implementation. The Bill of Rights also reinforces the right to express.