



Continuous Quality Improvement Report Labdara Lithuanian Nursing Home

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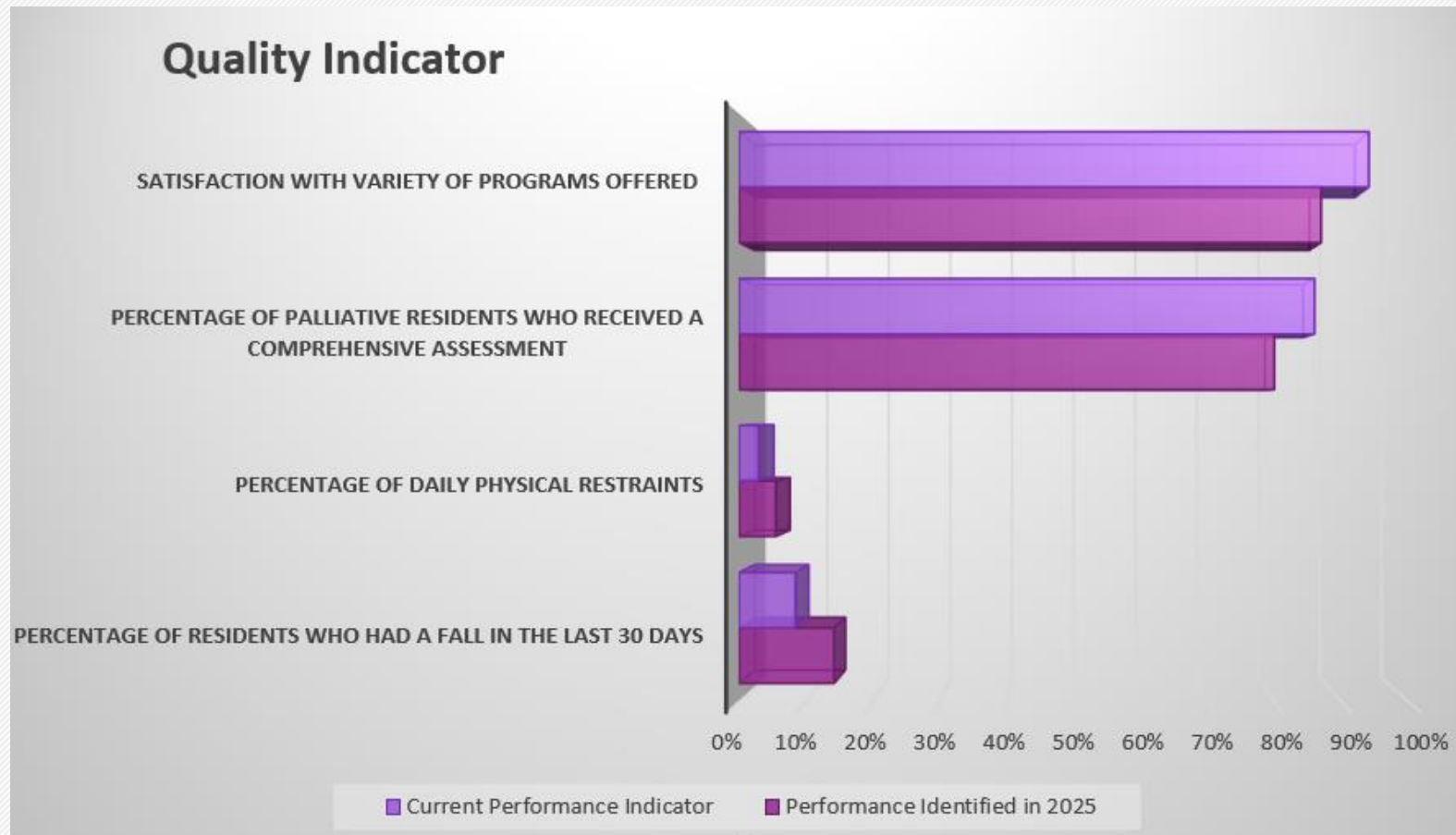
Introduction to Labdara Lithuanian Nursing Home

- Labdara Lithuanian Nursing Home (LLNH) is a Lithuanian community-oriented 90-bed Long-Term Care Home located in the west end of Toronto. We have been a pillar in the community for over 23 years, excelling and distinguishing ourselves by providing excellent and culturally competent resident and family centered care.
- LLNH strives to be a leader in the Long-Term Care sector. We are recognized for delivering high quality care and services, and for our commitment to working in partnership with residents and their families. We endeavor to design and deliver programming and services that meet the growing, changing and cultural needs of our residents and the community that we serve, and to provide a rewarding and empowering work environment for our staff.

Quality Improvement Outcomes from 2025-26

Quality Indicator	Performance Identified in 2025	Current Performance Indicator
Percentage of residents who had a fall in the last 30 days	14.20%	8.44%
Percentage of daily physical restraints	5.4%	2.95%
Percentage of palliative residents who received a comprehensive assessment	80%	86%
Satisfaction with variety of programs offered	87.09%	94.12%

Quality Improvement Outcomes from 2025-26



Quality Improvement Priority Setting Process for 2026-27

Labdara Lithuanian Nursing Home (“Labdara”) is pleased to share its 2026-27 Continuous Quality Improvement Plan Report. Labdara is committed to quality improvement and is reflected in our mission and strategic plan. People Centred Care remains a top priority to ensure residents and their families are supported to achieve their personal goals for their health and quality of life. Our focus this year will be to enhance the resident and family experience with transitions in care. We endeavor to ensure care decisions respect the unique needs, values and preferences of the residents and their support networks- and to ensure smooth, safe, coordinated and successful transitions in care. Our team remains committed to fostering culturally safe environments for our residents, family members, staff and visitors. We will continue to apply best practices and aim to sustain positive outcomes.

Meeting the requirements of the Fixing Long Term Care Act 2021 and Ontario Regulations 246/22, respecting Residents’ Bill of Rights, maintaining an environment that supports evidence-based practices and innovation remain high priorities for Labdara. Our Continuous Quality Improvement Plan is a roadmap to integrating excellent care, collaboration and enhanced quality of life for residents in our Home.

Quality Improvement Initiatives Cycle and Priority Setting Process

Labdara Lithuanian Nursing Home has developed an annual planning cycle for their Continuous Quality Improvement (CQI) Report and Quality Improvement Plan (QIP).

- Committees and councils are comprised of the interdisciplinary team which may include members of the nursing team, housekeeping and environmental services, recreation team, leadership and dietary
- Examples of some of the committees and councils that are held include the Leadership Team, Residents Council (RC), Family Council (FC), CQI Committee and the Board of Directors meetings

Quality Improvement Initiatives Cycle and Priority Setting Process

Quality Improvement planning includes an evaluation of the following factors to identify preliminary priorities:

- Evaluate progress achieved in the past year based on previous years quality improvement plan (QIP)
- Ongoing analysis of risk-adjusted data that is publicly reported and available from the Canadian Institute for Health Information (CIHI) and Health Quality Ontario (HQO) that allows us to benchmark provincially
- Non-risk adjusted quality indicators available for review to develop quality improvement plans to evaluate effectiveness of change ideas internally
- Annual resident and family satisfaction surveys
- Priorities identified through annual program evaluations
- Review of audits
- Tracking and analysis of critical incident reports and complaints
- Priority issues identified by the Province
- Best Practice Guidelines (BPGs)

Labdara Lithuanian Nursing Home's Approach To CQI (Policies, Procedures And Protocols)

Labdara Lithuanian Nursing Home's ("Labdara") Policies and Procedures, electronic documentation platform and practice standards, provide a baseline for staff in providing quality care and services, while maintaining safety. Labdara has adopted a structured approach to enhancing care and services for residents. The quality improvement (QI) model is a continuous process and an integral part of everyone's work, regardless of role or position within the organization.

Complete Trends Analysis

- Various quality improvement (QI) methodologies are used to conduct a root cause analysis to identify opportunities for improvement
- Process mapping, 5 whys, fishbone, Plan-Do-Study-Act (PDSA) cycles are examples of methods to identify root cause analysis

2. Set Improvement Aims

- Aim Statements are Specific Measurable, Attainable, Relevant, Timeline-Bound (SMART)
- It involves a QI team working towards a defined aim gathering and reviewing frequent measures and implementing change strategies using rapid cycle improvements.
- The aim statement includes the following parameters - "How much" (amount of improvement – e.g., 30%), "by when" (a month and year), "as measured by" (indicator or a general description of the indicator) and/or "target population" (e.g., residents, residents in specific area, etc.)

Labdara Lithuanian Nursing Home's Approach To CQI (Policies, Procedures And Protocols)

3. Developing and Testing Practice Change(s)

- As a principal, Labdara will identify practice changes to implement current evidence-based recommendations established by the published best practice guideline(s)
- With the completion of the gap analysis, and program evaluation as required, areas for improvement are identified by various teams that will move Labdara towards meeting its aim statement (s).
- Labdara will monitor and track outcomes of practice changes through observation, auditing and data collection

4. Implementation, Dissemination, Sustainability

Improvement teams consider the following factors when developing implementation of practice change plan:

- Outstanding work to be completed prior to implementation (e.g., final revisions to change ideas, embedding changes into existing workflow, updating relevant Policies and Procedures, workflow charts, documentation systems etc.)
- Education required to support implementation, including key staff resources (e.g., Best Practice Champions, Best Practice Liaisons and Co-liaisons).
- Communication required to various stakeholders, before during and after implementation
- Approach for spread across Labdara, (to residents, families, staff)
- Dissemination at monthly Best Practice Change meetings, conferences, webinars, Best Practice Symposium, etc.)

Process for Monitoring, Measuring, and Communicating Outcomes

Labdara Lithuanian Nursing Home sustains quality improvement by adopting a multi-faceted approach which includes the following:

- Implementing advanced technology for safety and efficiency
- Investing in staff: addressing high staff turnover and inadequate training
- Fostering a resident centric culture
- A cyclical process of reviewing data, measures and outcomes
- Engaging residents, families and the community by transparent and timely communication

Communication at the Organizational Level

Labdara Lithuanian Nursing Home uses different methods to monitor and measure progress.

Communication strategies include:

- Continuous Quality Improvement (CQI) and Best Practice Spotlight Organization (BPSO) boards
- Newsletters, practice change webinars and social media
- Electronic communication to stakeholders
- Team meetings, Resident Council (RC), Family Council (FC) and at Board of Director meetings
- Shift exchange, team huddles and electronic documentation dashboards

The Role of Resident and Family Experience Survey

- Resident and Family Satisfaction Surveys are conducted annually
- Results and improvement priority areas are communicated to the residents and their families, the Residents Council (RC), Family Council (FC), and team members through communication strategies already identified (see previous slide, slide 12)
- Goals and interventions are created in collaboration with key stakeholders such as the residents, families, team members and various committees and councils

Labdara Lithuanian Nursing Home 2025 Resident & Family Experience Survey Results

2025 Resident and Family Experience Surveys was completed in October 2025

Summary of areas home is performing well:

- 100% satisfaction with cultural and spiritual beliefs respected
- 100% satisfaction with would you recommend this home
- 100% satisfaction with overall cleanliness of the home and your room

Summary of areas for improvement identified:

- 94% satisfaction with are you satisfied with variety of programming
- 90% satisfaction with is the dining experience pleasurable and has adequate time been provided to consume meals
- 94% satisfaction with are you satisfied with outing experience (including activities provided outside the home)

Quality Improvement Indicators – Best Practice Guidelines

1. Preserving Quality of Life for residents in our Home through addressing gap analysis and sustainability of People Centred Care Guideline, Transitions in Care Guideline and the Palliative Approach to Care Guideline
2. Sustaining Resident's Comfort through addressing gap analysis and sustainability of Pain Assessment and Management Best Practice Guideline and the End-of-Life Care Guideline
3. Supporting Resident's safety in our Home through the process of addressing gap analysis and sustainability the Preventing Falls and Reducing Injury from Falls Guideline and the Dementia, Delirium and Depression Guideline
4. Meeting Resident's needs, wishes and choices through the implementation of Clinical Pathways (Resident and Family Centred Care, Pain Assessment and Management, Palliative Care and End of Life Care) and integration of goals of care discussions during resident care conferences
5. Data Integration through sustainability of AMPLIFI for the continuous updating of resident's information in both hospital and LTC Home record with transition exchanges
6. Supporting screening, assessment, prevention of risk and point of care decision making through the use of Assessment Tools and Clinical Pathways that integrate with Plan of Care through electronic platform for residents' assessment
7. Achieving Resident and Staff Satisfaction through Response and Action

Labdara Lithuanian Nursing Home Quality Improvement Priority Indicators 2025-26

1. Access and Flow

Indicator	Current Performance	Target Performance
Rate of ED visits for modified list of ambulatory care-sensitive conditions* per hundred long-term care residents	12.71	11

2. Safety

Indicator	Current Performance	Target Performance
Percentage of long-term care residents in daily physical restraints	2.95	2.0
Percentage of long-term care residents whose stage 2 to 4 pressure ulcer worsened	3.46	3.0
Percentage of long-term care residents who fell in the 30 days leading up to their assessment	8.44	8.0
Percentage of long-term care residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	24.55	22.0

Labdara Lithuanian Nursing Home Quality Improvement Priority Indicators 2025-26

3. Experience

Indicator	Current Performance	Target Performance
The percentage (%) of residents who responded positively to the question “are you satisfied with the variety of programming (activities) offered”	94.0	95.0
The percentage (%) of residents who responded positively to the question “is the dining experience pleasurable and has adequate time provided to consume meals”	90.0	95.0
The percentage (%) of residents who responded positively to the statement: “are you satisfied with outing experience (including activities provided outside of the long-term care home)”	94.0	95.0

Sustainable Quality Improvement

Labdara Lithuanian Nursing Home's Quality Improvement Process is Sustained through the following initiatives:

1. Clinical Pathway Sustainability:

- Auditing Process for Admission Assessment, RFCC and Delirium Clinical Pathway
- Fall Prevention and Management
- Pain Assessment and Management
- Palliative Care and End of Life Care
- Feedback provided to RNAO and Point Click Care
- Implement new Clinical Pathways as they become available (Dementia, Depression, Continence, Skin)

2. Data Integration (AMPLIFI Project)

- Integration of resident electronic health records between Villa Colombo Vaughan and hospital software systems

3. Safety and Technology

- Lab integration within electronic medical record (EMR)

4. Improved Staff Experience:

- Supporting Point of Care Decision Making: Clinical Pathways, ADC machine, electronic Skin and Wound Program, data integration electronic programs and medication safety
- Satisfaction Survey and Outcome
- Capacity development through partnerships with Colleges/Universities

5. Residents and Family Experience Survey:

- Experience Survey and Outcome
- Residents' Council Feedback
- Actions for improvement

6. Ongoing Quality Initiatives to Satisfy Requirements of the Following:

- Fixing Long-Term Care Homes Act and Regulations, any other applicable legislation
- Best Practice Recommendations
- Requirements of Health Quality Ontario