

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Satisfaction - Would Recommend	C	% / LTC home residents	In-house survey / 2023	88.20	75.00	Corporate Target	

Change Ideas

Change Idea #1 Enhance resident quality of life by promoting a person-centered approach to care and services

Methods	Process measures	Target for process measure	Comments
Complete "All about Me" assessment tool for new admissions and current residents who do not have this completed	# of assessments completed on new admissions monthly # of assessments completed on current residents monthly	A resident specific approach to plan of care based on individual needs and preferences will be implemented for all new admissions by July 2024 and current residents by November 2024	

Change Idea #2 Engage in regular discussion with residents on their overall satisfaction with services provided

Methods	Process measures	Target for process measure	Comments
Department leads will attend Resident council to actively ask residents about their services provided. Focus will be on the key questions from the survey that need improvement.	Increase percentages on survey	Ongoing feedback from residents on satisfaction with service being provided by staff.	Continue to monitor and track change idea progress

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents responding positively to "I am satisfied with the temperature of my food and beverages"	C	% / LTC home residents	In-house survey / 2023	67.70	75.00	Corporate Target	

Change Ideas

Change Idea #1 Engage in regular discussion with residents during Resident Council and or Food Committee regarding temperature of food and beverages

Methods	Process measures	Target for process measure	Comments
Food Service Manager will be present in dining room to actively ask residents about their meal. Focus will be on the key questions from the survey that need improvement	Increase percentage on survey	ongoing feedback from residents on satisfaction with service being provided by staff.	Continue to monitor and track change idea progress

Change Idea #2 Staff to be fully aware of resident and family feedback from surveys regarding the food and beverage temperature

Methods	Process measures	Target for process measure	Comments
During Town hall and regular meetings with staff share the survey results and remind staff of where the improvement is required.	Increase percentages on survey	Ongoing feedback from residents on satisfaction with service being provided by staff	Continue to monitor and track change idea progress

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents responding positively to: "if I need help right away, I can get it (e.g. when I ring the call bell or ask for help, I don't have to wait)"	C	% / LTC home residents	In-house survey / 2023	67.60	75.00	Corporate Target	

Change Ideas

Change Idea #1 Engage in regular discussion with residents during resident council and/or care conferences to gauge if they feel when they ring the call bell or ask for help they have to wait long

Methods	Process measures	Target for process measure	Comments
Managers will ask residents for feedback during their walkabouts	Increase percentages on survey	Ongoing feedback from residents on their feelings around call bells being answered in a timely manner	Continual monitoring of change idea

Change Idea #2 Staff to become sensitive to resident perception to their requests through Annual education and as required

Methods	Process measures	Target for process measure	Comments
Provide education for all staff the excellence in Person Centred care course with a focus on the questions we want to improve in the survey results.	Increase percentages on survey	Ongoing feedback from residents on satisfaction with service being provided by staff	Continue to monitor and track change idea progress

Change Idea #3 Engage in regular discussions with family members/residents during tours about the reality of Long Term Care.

Methods	Process measures	Target for process measure	Comments
Resident Support Coordinator to provide education for residents and family members regarding the ratio of PSW and nurses to residents during tours and upon move in's.	Increase percentage on survey	Ongoing feedback from residents on their feelings around call bells being answered in a timely manner.	Continue to monitor and track change idea progress

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents responding positively to: "I am satisfied with the timing and schedule of recreation programs"	C	% / LTC home residents	In-house survey / 2023	66.70	75.00	Corporate Target	

Change Ideas

Change Idea #1 Engage in regular discussion with residents on their satisfaction with recreation schedule and timing of activities

Methods	Process measures	Target for process measure	Comments
Recreation Manager will consider making this standing agenda item for council	Increase percentages on survey	Ongoing feedback from residents on their feelings around the recreation schedule and timing of activities.	Continual monitoring of change idea

Change Idea #2 Recreation Aids and other department staff to be fully aware of resident and family feedback from surveys

Methods	Process measures	Target for process measure	Comments
Review of survey comments at townhalls for awareness and action planning Recreation to discuss during departmental meeting	Increase percentages on survey	Ongoing feedback from residents on the timing and schedule of recreation programs	Continual monitoring of change idea

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Satisfaction - Would Recommend	C	% / LTC home residents	In-house survey / 2023	88.00	85.00	Corporate Target	

Change Ideas

Change Idea #1 Actively encourage and seek out family member feedback on a regular basis

Methods	Process measures	Target for process measure	Comments
Managers will ask family members for feedback during their walk abouts and at Care Conference	Increase percentage on survey	Ongoing feedback from family members on their feelings around service provided	Continual monitoring of change idea

Change Idea #2 During the move in Resident Service Coordinator will verbally review the process for providing feedback or to discuss concerns/questions with family members/residents during move in (in addition to the written copies of the process and contact information provided in the admission package)

Methods	Process measures	Target for process measure	Comments
Resident Support Coordinator will make this standing agenda item for family members during care conference	Increase percentage on survey	Ongoing feedback from residents/family members on their feelings around ability of staff to actively listen.	Continual monitoring of change idea

Change Idea #3 Initiate and facilitate ongoing dialogue with residents and their family members regarding goals of care

Methods	Process measures	Target for process measure	Comments
1)Schedule initial care conference with multidisciplinary approach within 6 weeks of admission to discuss goals of care. 2)Residents will have their schedule care conference at least annually and in person to facilitate enhanced communication between interdisciplinary team, residents and their family members. 3)Promptly update resident and their loved ones regarding resident changes in condition and discuss care interventions from home level vs. hospital settings.	Increase percentage on survey.	Ongoing feedback from family members regarding their over satisfaction with services provided.	Continual monitoring of change idea

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of Family members responding positively to: "I am satisfied with the timing and schedule of spiritual care services"	C	% / LTC home residents	In-house survey / 2023	77.40	85.00	Corporate Target	

Change Ideas

Change Idea #1 Engage residents in Calendar planning

Methods	Process measures	Target for process measure	Comments
Create an open dialogue with residents with regard to provision of calendars	Number of feedback and suggestions from Residents	Maintain resident satisfaction in "Strongly Agree" responses to the outlined survey question by in the 2023 survey.	Continual monitoring of change idea

Change Idea #2 Engage residents in decision making processes including the timing and schedule of spiritual care service.

Methods	Process measures	Target for process measure	Comments
Recreation Managers will identify key questions for improvement in the Recreation calendar. The calendar will be revised based on resident input	Increase percentages on survey reflect focus on satisfaction with recreation	Ongoing feedback on recreation satisfaction will be obtained and documented through resident council and feedback	Continue to monitor and track change idea progress

Measure - Dimension: Patient-centred

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of family members responding positively to: "I am satisfied with the variety of spiritual care services"	C	% / LTC home residents	In-house survey / 2023	72.20	85.00	Corporate Target	

Change Ideas

Change Idea #1 Engage residents in Calendar planning

Methods	Process measures	Target for process measure	Comments
Recreation Managers will plan Calendar planning with residents monthly	Increase percentages on survey	Ongoing feedback from residents on their feelings around ability the satisfaction with the variety of spiritual services	

Change Idea #2 Spiritual care services will be offered through various religious and spiritual groups

Methods	Process measures	Target for process measure	Comments
Ask residents to provide information upon move in to inquire about spiritual preference and update Calendar according to needs and preferences	Increase percentages on survey	Ongoing feedback from residents on satisfaction with spiritual service being provided	

Change Idea #3 Utilize a resident specific approach to plan of care based on individual needs and preferences

Methods	Process measures	Target for process measure	Comments
Complete Psychosocial assessment for new admissions and ensure to update for current residents as needed	Increase percentage on survey	Ongoing feedback from residents on satisfaction with spiritual services	Continual monitoring of change idea

Measure - Dimension: Patient-centred

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of family members responding positively to: " There is good choice of continence care products"	C	% / LTC home residents	In-house survey / 2023	68.50	85.00	Corporate Target	

Change Ideas

Change Idea #1 Upon Move in the nurse will explain the continence care products to new residents and their family member if applicable

Methods	Process measures	Target for process measure	Comments
The home will establish a continence Care Team that includes: Continence care Lead (PSW, RPN)	Increase percentages on survey	Ongoing feedback from residents and family members regarding the incontinence products provided in the home.	Continual monitoring of change idea

Change Idea #2 Education will be provided to empower front line staff with appropriate knowledge and skills in the area oof care to improve the quality of care given to residents - Determine the appropriate incontinence product based on the Resident's individuals

Methods	Process measures	Target for process measure	Comments
Continence Lead/Team to conduct weekly audit	Increase percentage on survey.	Ongoing feedback from residents on their feelings around continence Care products.	Continual monitoring of change idea

Safety

Measure - Dimension: Safe

Indicator #9	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC home residents who fell in the 30 days leading up to their assessment	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	12.97	15.00	Corporate Target	

Change Ideas

Change Idea #1 Conduct environmental assessments of resident spaces to identify potential fall risk areas and address areas for improvement

Methods	Process measures	Target for process measure	Comments
1. Staff to do environmental assessments for all residents at high risk for falls at minimum monthly 2. Address any identified deficiencies from completed assessments	# of environmental assessments completed monthly # of identified deficiencies from assessments that were corrected monthly	Environmental risk assessments of resident spaces to identify fall risk will be completed by June 2024	

Change Idea #2 Implement specific activity program at afternoon change of shift for residents who are high risk for falls

Methods	Process measures	Target for process measure	Comments
1. Review current high-risk residents for falls to identify their needs/preferences for activities 2. Implement program during afternoon change of shift to engage residents and prevent falls	# of residents reviewed for activity needs/preferences weekly # of activity programs that occur during change of shift in afternoon weekly	Specific activity program at afternoon change of shift will be implemented by June 2024	

Measure - Dimension: Safe

Indicator #10	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents without psychosis who were given antipsychotic medication in the 7 days preceding their resident assessment	O	% / LTC home residents	CIHI CCRS / July 2023–September 2023 (Q2 2023/24), with rolling 4-quarter average	17.08	17.30	Corporate Target	

Change Ideas

Change Idea #1 Medication reviews completed for all residents currently prescribed antipsychotics

Methods	Process measures	Target for process measure	Comments
1) Review all residents who are currently prescribed antipsychotics 2) Review plan of care for supporting diagnosis 3) If no diagnosis, team will review and implement reduction strategy process	# of residents reviewed monthly # of plans of care reviewed that have supporting diagnosis # of reduction strategies implemented monthly	All residents currently prescribed antipsychotics will have a medication review completed by July 2024	

Change Idea #2 Provide educational material to families and/or residents on antipsychotics and the importance of minimizing use.

Methods	Process measures	Target for process measure	Comments
1) Provide families with best practice information on reducing antipsychotics such as – Family Fact sheet from Canadian Geriatric Society, Pharmacy etc. 2) Add information on reducing antipsychotics to tour and admission packages	# of families provided with best practice information on reducing antipsychotics monthly # of tour and admission packages provided with antipsychotic reduction information included monthly	Educational material will be provided to families and/or residents on antipsychotics and important of minimizing use by Sept 2024	

Measure - Dimension: Safe

Indicator #11	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with restraints	C	% / LTC home residents	Other / 2023	0.00	2.50	Corporate Target	

Change Ideas**Change Idea #1** Review current restraints and determine plan for trialing alternatives to restraints

Methods	Process measures	Target for process measure	Comments
1) Review all residents currently utilizing restraints 2) Meet with families/residents to discuss alternatives that could be trialed and determine action plan in collaboration with family/resident	# residents reviewed monthly # of meetings held with families/residents to discuss alternatives monthly # of action plans in place for reduction of restraints in collaboration with family/resident monthly	100% of restraints will be reviewed and plans implemented for trialing alternatives by Sept 2024	

Change Idea #2 Re-educate staff on restraint policy and use of alternatives to restraints

Methods	Process measures	Target for process measure	Comments
Organize education sessions with all staff on restraint policy and alternatives to restraints	# of education sessions held monthly	100% of staff will be re-educated on restraint policy and alternatives to restraints by Sept 2024	

Measure - Dimension: Safe

Indicator #12	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of LTC residents with worsened ulcers stages 2-4	C	% / LTC home residents	Other / 2023	1.03	2.00	Corporate Target	

Change Ideas

Change Idea #1 Review current bed systems/surfaces for residents with PURS score 3 or greater.

Methods	Process measures	Target for process measure	Comments
1) Develop list of residents with PURS score 3 or greater 2) Skin/wound team to review residents list to determine if surface meets their needs 3) Replace mattress/surface if required	# of residents with PURS score 3 or greater # of reviews completed of bed surfaces/mattresses monthly # of bed surfaces /mattresses replaced monthly	A review of the current bed systems/surfaces for residents with PURS score 3 or greater will be completed by August 2024	

Change Idea #2 Improve Registered staff knowledge on identification and staging of pressure injuries

Methods	Process measures	Target for process measure	Comments
Provide education for Registered staff on correct staging of pressure injuries	# of education sessions provided monthly for Registered staff on correct staging of pressure injuries	100% of registered staff will have received education on identification and staging of pressure injuries by Sept 2024	