

## Experience

### Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of Residents who would recommend Elmwood Place to others.	C	% / LTC home residents	In-house survey / 2024 Annual Survey	94.60	75.00	Corporate target	

### Change Ideas

Change Idea #1 Increase variety and amount of Recreation programming and activities for Residents.

Methods	Process measures	Target for process measure	Comments
1. Recreation team to increase number of programs offered each day. 2. Work with Resident Council to fund monthly outings (shopping, drives, movies etc) 3. Engage residents and families to run programs that are of interest to them.	# of new programs offered each week # of outings offered each month # of resident/family volunteers	Increase in outings and programs by August 2024	

Change Idea #2 Increase Resident involvement in deciding programming and meals for their community.

Methods	Process measures	Target for process measure	Comments
Introduce monthly home area calendar and menu review for residents to gain input and showcase new menu items (offer as tastings)	# of meetings held each month	Implement monthly meetings by Juan 2024.	

**Measure - Dimension: Patient-centred**

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of Family Members who would Recommend Elmwood Place to others.	C	% / Family	In-house survey / 2024 Annual Survey	76.00	75.00	Corporate Target	

**Change Ideas****Change Idea #1** Increase Family and Caregiver Involvement with the Home.

Methods	Process measures	Target for process measure	Comments
1. Inviting Caregivers to attend programs with their family at the home. 2. Hosting Family Celebrations Events	Increased number of families attending programs with their loved ones. # of special family events held		Implementation is targeted for August 2024.

**Change Idea #2** Increased communication with Families and Caregivers

Methods	Process measures	Target for process measure	Comments
Increased communications offering education and information, updates on operations and their loved ones.	# of communication provided to families and caregivers.		Monthly Caregiver communication tool will be developed and in place by August 2024.

## Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Increase family's satisfaction with our continence care products offered.	C	% / Family	In-house survey / 2024 Annual Survey	23.80	85.00	Corporate Target	

## Change Ideas

Change Idea #1 Increase family and caregiver knowledge on continence care products.

Methods	Process measures	Target for process measure	Comments
1. Host an information session with our Continence Product Supplier for Families to attend. 2. Add continence care products as a discussion at care conferences, so we can work to address any concerns. Reach out to supplier to see if they have a product handout we can provide.	# of attendees at information session on products available # of conference where continence products are discussed, and progress noted	implementation planned for September 2024.	

**Measure - Dimension: Patient-centred**

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of families who are satisfied with the quality-of-care residents receive from social workers(s).	C	% / Family	In-house survey / 2024 Annual Survey	46.20	85.00	Corporate Target	

**Change Ideas**

Change Idea #1 Contractually engage a Social Worker to increase support and presence in the home.

Methods	Process measures	Target for process measure	Comments
initiate a service agreement to have a social worker in the home to be available to provide one to one and/or group support to our residents.	Agreement and service in place.		Implementation is planned for May 2024.

Change Idea #2 Increase education for Families and Resident's on Community Support Services available for them and their loved ones.

Methods	Process measures	Target for process measure	Comments
1. Host information session from community partners showcasing services that are available. 2. Source or develop a service information guide for families and residents.	# of information sessions provided.		Planned implementation is end of June 2024.

## Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Increase percentage of Residents who feel they have friends in the home.	C	% / LTC home residents	In-house survey / 2024 Annual Survey	66.10	85.00	Coporate Target	

## Change Ideas

Change Idea #1 Increase opportunities for residents to build connections and friendships.

Methods	Process measures	Target for process measure	Comments
1. Host interest focused programs/ activities (cards night, men's club, gardening and walking group etc.) so residents with common interests can connect. 2. Connecting resident with their community through volunteers, outings and partnerships	# of "focus" programs offered each month # of volunteers and community partnerships established	Implementation for end of July 2024.	

Change Idea #2 Host Cultural Programs/events, focusing on the ethnicities in the home population.

Methods	Process measures	Target for process measure	Comments
1. engage the residents and their families in assisting us to plan and event featuring their culture, place of origin. 2. theme a meal that day around their of country of origin/culture. 3. look to involve community partners as applicable.	# of Cultural events hosted	Implementation is planned for May 2024.	

## Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Increase percentage of residents who feel staff are friendly.	C	% / LTC home residents	In-house survey / 2024 Annual Survey	83.90	85.00	Corporate Target	

## Change Ideas

### Change Idea #1 Improve staff communication skills with residents

Methods	Process measures	Target for process measure	Comments
Provide Customer Service training to staff during orientation and annually thereafter.	# of staff trained in customer service	implementation is planned for October 2024.	

### Change Idea #2 Have staff participate in Cultural events as relevant to create a connection with residents.

Methods	Process measures	Target for process measure	Comments
1. Have staff who are of same ethnic background assist resident(s) and recreation team with planning cultural. 2. have staff participate in event (dance, cook, highlight their culture in a talk/presentation) 3. have staff host travelogues for residents and families showcasing their travel adventures.	# of non-recreation staff participants in cultural events. # of travelogue programs provided.	Planned implementation is May 2024.	

## Safety

### Measure - Dimension: Safe

Indicator #7	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	18.12	15.00	Corporate Target	

### Change Ideas

Change Idea #1 Implement focused activities for residents who experience falls in the afternoon hours.

Methods	Process measures	Target for process measure	Comments
1. review residents who are high risk or have a history of falls in the afternoon to determine their activity needs/preferences are during the afternoon hours (1:00-5:00) to engage residents in activities.	# of programs that occur during the afternoon weekly. # of residents reviewed for activity needs/preferences.		Specific afternoon programming to be implemented by August 2024.

Change Idea #2 Review Assistive Devices for High Risk of Fall Residents to ensure Appropriate Supports are in place.

Methods	Process measures	Target for process measure	Comments
Falls committee to care study residents who are high fallers to ensure: 1. proper assistive devices are being used to prevent falls and/or reduce injury. 2. Engagement of rehab and restorative team is engaged appropriately to support.	# of high fall risk residents are reviewed by Falls Committee.	100% of high-risk residents are reviewed, and a plan of action developed to assist with fall mitigation by August 2024.	

Change Idea #3 Conduct environmental assessments of resident areas to identify potential fall risks and address to mitigate the risk.

Methods	Process measures	Target for process measure	Comments
1. Staff to complete environmental risk assessments for all residents identified as a high fall risk. 2. Address any identified fall risk hazards from completed assessments.	# of environmental assessments completed monthly. # of identified deficiencies noted in assessments that were addressed.	Environments risk assessment of resident spaces to identify Fall hazards will be completed by June 2024 for all residents identifies as high risk of falls.	

### Measure - Dimension: Safe

Indicator #8	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	21.05	18.00	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 caregivers and/or residents on antipsychotics and the importance of minimizing use when able.

Methods	Process measures	Target for process measure	Comments
1. Provide caregivers/residents with best practice information on reducing antipsychotics such as - Family Fact Sheets from the Canadian Geriatric Society, Pharmacy etc, during care conferences and at admission. 2. Add information on reducing antipsychotics to tour and admission packages.	# of caregivers/residents provided with information on reducing antipsychotics monthly. # of tour and admission packages provided with antipsychotic reduction information included monthly	Materials will be in place and provided by September 2024.	

**Measure - Dimension: Safe**

Indicator #9	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents with restraints	C	% / Adult long stay home care clients	POC/PCC Audits / 2023	CB	2.50	corporate target	

**Change Ideas**

Change Idea #1 Meeting with residents and their caregivers to discuss alternatives to restraints that we can trial to alleviate concern/behaviour that prompted a request for a restraint.

Methods	Process measures	Target for process measure	Comments
1. Review all residents currently using restraints. Meet with those residents/caregivers to provide education on restraints and provide alternative options that ensure resident safety without use of restraints.	# of residents reviewed monthly. # of meetings had with residents/caregivers to discuss alternative each month	100% of restraints will be reviewed and plans for alternatives to be trialed by Sept 2024.	

**Measure - Dimension: Safe**

Indicator #10	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
% of residents with worsened ulcers stages 2-4	C	Months / Adult long stay home care clients	POC/PCC Audits / 2023	2.50	2.00	Corporate Target	

## Change Ideas

Change Idea #1 Review bed systems and surfaces for residents with a PURS score of 3 or greater.

Methods	Process measures	Target for process measure	Comments
1. develop a list of residents with a PURS score of 3 or greater. 2. Skin/wound team to review residents on list to determine if bed surface meets their needs.	# of bed surfaces/mattress reviewed monthly for residents with PURS score of 3 or greater.	A review of the current bed systems/surfaces for residents with PURS of 3 or greater will be completed by 2024.	

Change Idea #2 Improve Registered staff knowledge for identifying and staging pressure ulcers.

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

Change Idea #3 Ensure all Resident Wounds are assessed at a minimum of every 7 days by Registered Staff.

Methods	Process measures	Target for process measure	Comments
Provide daily assignment list of residents' who are within 1 day of the required assessment window.	# of residents who exceeded minimum assessment timeframe monthly.	100% of residents with pressure ulcers will be assessed within specified timeframe each month by May 2024.	