

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident would recommend the home	C	% / LTC home residents	In-house survey / Sept 11- Oct 31 2023	97.40	75.00	Corporate target	

Change Ideas

Change Idea #1 Increase the % of residents that would recommend the home

Methods	Process measures	Target for process measure	Comments
Identify areas of improvement and develop action plan to address	# of residents that would recommend	# of residents that would recommend the home will increase on 2024 survey results	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am aware of the recreation services offered in the home	C	% / LTC home residents	In house data collection / Sept 11- Oct 31 2023	71.80	80.00	87.0 % of LTC Division Overall 2023	

Change Ideas

Change Idea #1 Increase % of residents will be aware of the recreation services offered in the home

Methods	Process measures	Target for process measure	Comments
Identify individual communication needs of the resident and share program information via best suited avenue of communication	# of programs shared with residents monthly	Increase % of residents will be aware of the programs offered in the home	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I am satisfied with the variety of food and beverage options	C	% / LTC home residents	In-house survey / Sept 11- Oct 31 2023	65.00	70.00	68.5% LTC Division overall	

Change Ideas

Change Idea #1 Increase % of residents will feel they have input into food and beverage choices in the home

Methods	Process measures	Target for process measure	Comments
1) Increase communication during resident council meetings regarding the menu 2) Choice of food offered at dine-ins is resident requested and different from the menu	# of residents feeling increased satisfaction of variety of food and beverages	Increased % of residents will feel they have input into food and beverage choices in the home reflected in 2024 survey results	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family would recommend the home to others	C	% / Family	In-house survey / Sept 11- Oct 31 2023	85.30	85.00	Corporate target	

Change Ideas

Change Idea #1 Increased % of families that would recommend the home to others

Methods	Process measures	Target for process measure	Comments
Identify key areas needing improvement via 2023 survey results and develop action plan	1)# of families that would recommend will increase 2) overall satisfaction with the home	% of families that would recommend the home will increase as shown in the 2024 survey results	

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family is satisfied with the variety of recreation programs in the home	C	% / Family	In-house survey / Sept 11- Oct 31 2023	50.00	63.00	70.6% LTC Division overall	

Change Ideas

Change Idea #1 Increased satisfaction of the resident's family member with the variety of activities offered in the home

Methods	Process measures	Target for process measure	Comments
1) Identify the needs and expectations of the resident and their family member via Family Council chair 2) Audit and review current programs offered in the home and create action plan to introduce new and relevant programs	1) # of new and relevant programs that are introduced in the home 2) # suggestions from families are considered 3) # of residents that needs are not being met	Increased satisfaction of the variety of programs offered in the home by families will be reflected in the 2024 survey results	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
I feel my feedback on the resident's goals and care plan is considered and incorporated whenever possible	C	% / Family	In-house survey / Sept 11- Oct 31 2023	58.80	70.00	73.7% LTC Division overall	

Change Ideas

Change Idea #1 Families feel their feedback is considered and incorporated into the resident's goals and care plan whenever possible.

Methods	Process measures	Target for process measure	Comments
1) Ensure goals and care plan are reviewed during care conference 2) Feedback from family is considered and explanation provided if not appropriate for the resident	1) # of family members' feedback received and considered 2) # of residents' goals and care plans reviewed at care conferences	Increased % of family members feel their feedback is considered and incorporated into the resident's goals and care plan whenever possible, as reflected in the 2024 survey results	

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	21.79	15.00	Corporate target	

Change Ideas

Change Idea #1 Enhance monitoring of residents by other frontline staff during nursing shift change.

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

Change Idea #2 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.	1. # of environmental assessments completed monthly 2. # 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	

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	39.42	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 care plan for supporting diagnosis. 3. If no diagnosis, team will review and implement reduction strategy process.	1. # of residents reviewed monthly 2. # of care plans reviewed that have supporting diagnosis 3. # 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 antipsychotic to tour and admission packages.	1. # of families provided with best practice information on reducing antipsychotics monthly 2. # 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 the importance of minimizing use by September 2024.	

Measure - Dimension: Safe

Indicator #9	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of long-term care home residents in daily physical restraints over the last 7 days	C	% / LTC home residents	CIHI CCRS / July 2023-September 2023 with rolling quarter average	4.60	2.50	Corporate target	

Change Ideas

Change Idea #1 1) Review current restraints and determine plan for trialing alternatives to restraints 2) Re-educate staff on restraint policy and use of alternative to restraints

Methods	Process measures	Target for process measure	Comments
1) Review of 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 monthly	1) # of residents monthly 2) # of meetings held with families/residents to discuss alternatives monthly 3) # of action plans in place for reduction of restraints in collaboration with families/resident monthly	100% of restraints will be reviewed and plans implemented for trialing alternatives by September 2024	

Measure - Dimension: Safe

Indicator #10	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of long-term care home residents who developed a stage 2 to 4 pressure ulcer or had a pressure ulcer that worsened to a stage 2, 3 or 4	C	% / LTC home residents	POC/PCC Audits / Q3 2023	0.70	2.00	Corporate target	

Change Ideas

Change Idea #1 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 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 September 2024	