

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Would you recommend this home?	C	% / LTC home residents	In-house survey / Jan - sept 2023	73.00	80.00	Corporate target	

Change Ideas

Change Idea #1 The home will communicate the QIP plan with the residents for the planned initiatives planned for the year

Methods	Process measures	Target for process measure	Comments
The QIP plan will be posted on the home webpage and within the home. The plan will be shared with families and the resident council and reviewed during meetings for progress on plan.	# of times QIP action plan discussed at resident council meetings # of recommendations provided and implemented	The percentage of residents who would recommend the home to others will increase to the target of 80% by 2024 survey.	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident experience - I have input into the recreation programs available	C	% / LTC home residents	In-house survey / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	41.20	75.00	Corporate Target	

Change Ideas

Change Idea #1 Have residents participate in monthly meetings with the recreation department to plan the activities calendar.

Methods	Process measures	Target for process measure	Comments
Monthly meeting with the residents Recreation department are to completed monthly feedback surveys.	Number of residents who participate in the monthly meeting. Number of recreation surveys completed monthly for feedback on the activities. Number of implemented activities from resident feedback	The recreation department will host monthly meetings starting in March 2024 for residents to provide residents with a opportunity to plan the activities calendar.	

Measure - Dimension: Patient-centred

Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Experience - 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 long).	C	% / LTC home residents	In-house survey / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	51.40	80.00	Corporate Target	

Change Ideas

Change Idea #1 The home is adding three PSW float positions on day shift to increase hours of care Ongoing recruitment of PSWs, RPNs and RNs

Methods	Process measures	Target for process measure	Comments
Recruiting of 3 PSWs to the new PSW float positions and ongoing recruitment of RNs and RPNs	Number of staff hired to the PSW float positions. Number of RNs, RPNs and PSWs hired		The home will hire and implement the 3 PSW float positions starting in April 2024.

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Resident Experience - I feel my goals and wishes are considered and incorporated into the care plan whenever possible.	C	% / LTC home residents	In-house survey / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	51.60	80.00	Corporate Target	

Change Ideas

Change Idea #1 Residents to attend their annual plan of Care review (MDC). Provide residents with a copy of their plan of care.

Methods	Process measures	Target for process measure	Comments
Inviting residents to attend their annual plan of care review Provide the residents with a copy of their plan of Care	Number of residents who attend their annual plan of care review		Provide residents with a copy of their care plan and have them attend their annual meeting starting in March 2024.

Change Idea #2 The RAI department (RPNs) will review the care plan with the residents quarterly.

Methods	Process measures	Target for process measure	Comments
Review the residents plan of care with them quarterly as part of the RAI coding.	Number of care plans reviewed with the residents so that the residents goals are incorporated into the plan of care		Residents will participate in a quarterly care plan review with the RAI department.

Measure - Dimension: Patient-centred

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Experience - The resident has input into the recreation programs available.	C	% / Family	In-house survey / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	12.50	80.00	Corporate Target	

Change Ideas

Change Idea #1 Have residents participate in monthly meetings with the recreation department to plan the activities calendar

Methods	Process measures	Target for process measure	Comments
Monthly meeting with the residents Newsletters to families and residents monthly	Number of residents who participate in the monthly meeting. Number of implemented activities from resident feedback.	Have residents participate in monthly meetings with the recreation department to plan the activities calendar starting in March 2024 and ongoing.	

Measure - Dimension: Patient-centred

Indicator #6	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Experience - There is a good choice of continence care products.	C	% / Family	In-house survey / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	29.40	50.00	Continued improvement toward 85% Corporate Target	Prevail

Change Ideas

Change Idea #1 Provide information to the families on the continence products.

Methods	Process measures	Target for process measure	Comments
Ask Prevail to provide information to disseminate to the families on continence products	# of families provided with information on continence products.	Provide information to the families on the continence products by July 2024.	

Measure - Dimension: Patient-centred

Indicator #7	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Family Experience - I have an opportunity to provide input on food and beverage options.	C	% / Family	In-house survey / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	42.90	70.00	Progressing toward 85% Corporate Target	

Change Ideas

Change Idea #1 Invite families to the food committee to provide input to the food and beverage options.

Methods	Process measures	Target for process measure	Comments
A poster will be posted in the home to notify families of the food committee meeting quarterly. Use of the home newsletter to notify families of the food committee quarterly meeting.	Number of families who attend the food committee meeting	Invite families to the food committee to provide input to the food and beverage options starting in April 2024	

Change Idea #2 Ask for family feedback at the annual IDTC conference on the food and beverage options.

Methods	Process measures	Target for process measure	Comments
Invite families to the food and committee quarterly meeting and ask families for feedback at the annual resident meeting.	Number of families who provide input to the food and beverage options.	Ask for family feedback at the annual IDTC conference of on the food and beverage options starting in April 2024 and ongoing after that.	

Measure - Dimension: Patient-centred

Indicator #8	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Would you recommend this home	C	% / Family	In-house survey / Sept-Oct 2023	75.00	80.00	Corporate target	

Change Ideas

Change Idea #1 The home will communicate the QIP plan with the family council and families for the planned initiatives planned for the year

Methods	Process measures	Target for process measure	Comments
The QIP plan will be posted on the home webpage and within the home. The plan will be shared with families and the family council and reviewed during meetings for progress on plan.	# of times QIP action plan discussed at family council meetings # of recommendations provided and implemented	The percentage of families who would recommend the home to others will increase to the target of 80% by 2024 survey.	

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	19.38	15.00	Extencicare Corporate target	Achieva, Medisystem, Behavioural Supports Ontario

Change Ideas

Change Idea #1 Hire additional PSWs to work in PSW float positions to support the residents with their ADLs

Methods	Process measures	Target for process measure	Comments
Posting of three additional full time PSW positions on day shift to provide more support to the residents on the units with their ADLs.	Hiring of three additional PSW on day shift # of additional PSW's hired	The three additional PSWs will be in place and implemented by May 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	15.45	15.00	Home is currently meeting Extendicare Target of 17.3%. Continuing to improve in this indicator.	Medisystem pharmacy, Behavioural Supports Ontario

Change Ideas**Change Idea #1** Monthly medication reviews of residents who trigger for antipsychotic usage

Methods	Process measures	Target for process measure	Comments
Monthly meeting with the physician, pharmacist, Behavioural support lead, director of Care, RAI lead and nursing to review residents who trigger for the indicator	The number of medication reviews completed per month for antipsychotic usage in the home.	Standardized monthly medication review process in place April 2024	

Measure - Dimension: Safe

Indicator #11	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
percentage of residents in daily physical restraints	C	% / LTC home residents	CIHI CCRS / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	0.00	0.00	Maintaining 0% target and remaining better than Extendicare target of 2.5%.	Medisystem pharmacy, Medline, Behavioural supports Ontario

Change Ideas

Change Idea #1 The home will continue to have zero percent restraint use in the home

Methods	Process measures	Target for process measure	Comments
Ongoing staff, family and resident education upon admission and review of restraint requests	The home will review restraint usage monthly within the home.	The home will continue with a zero restraint usage in the home and will remain below the corporate target	Home is meeting the indicator

Measure - Dimension: Safe

Indicator #12	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	CIHI CCRS / July 2023 - September 2023 (Q2 2023/24), with rolling 4-quarter average	1.23	1.00	The home is currently meeting the Extendicare target of 2% and will continue to utilize prevention strategies to continue to meet the target.	

Change Ideas

Change Idea #1 Implementation of prevention strategies for wounds with the use of barrier cream to the residents feet and coccyx.

Methods	Process measures	Target for process measure	Comments
Application of barrier cream to residents with a CPS score of 3 or above, feet, heels and coccyx twice daily	Percentage of residents who develop a stage 2 to 4 pressure ulcer or had a pressure ulcer that worsened to a stage 2,3,4.	The home will meet the corporate target by implementing the prevention strategies in reducing new or worsening stage 2 to 4 pressure ulcers.	Home is currently meeting the indicator