

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of residents who responded positively to the statement: "I would recommend this home to others".	C	% / LTC home residents	In-house survey / 2024	81.50	85.00	Organizational target	

Change Ideas

Change Idea #1 Empathy training for all staff. To increase positive relationships between staff and residents.

Methods	Process measures	Target for process measure	Comments
Conduct empathy training for staff from all disciplines. training will include material, discussion and learning assessments.	% of staff trained	70% of staff trained by June. 100% of staff trained by December.	

Change Idea #2 Increase number of residents on a bathroom routine schedule. To increase satisfaction with continence program.

Methods	Process measures	Target for process measure	Comments
Restorative nursing to review all residents for potential addition of bathroom routine schedule being added to the plan of care. Develop and implement a schedule for all residents who would benefit.	% of residents reviewed # of residents added to bathroom routine schedule	100% of residents reviewed by May. 20 residents placed on bathroom routine schedule.	

Change Idea #3 Increase number of Continence Champion PSWs. To increase satisfaction with continence program.

Methods	Process measures	Target for process measure	Comments
Train additional PSWs to be champions in the continence program. These PSWs will be resources for their peers and can help to education on the proper use of products and provide more specific reports on successes/challenges in a timely manner.	# of additional continence champion PSWs.	5 additional champions trained by of end June.	

Change Idea #4 Subscription service for paper copy of monthly newsletter. Delivered to rooms. To increase satisfaction with communication.

Methods	Process measures	Target for process measure	Comments
In addition to digital and pick up paper copies. Develop a process where residents can subscribe to receive a paper copy of the monthly newsletter delivered to their rooms. Process would also include subscribing new residents upon admission.	# of residents subscribed to paper copy delivery % of new admissions offered option to subscribe	40 current residents subscribed by July 100% of new admissions offered subscription by June	

Change Idea #5 Include residents as part of outbreak management team. Respecting confidentiality. To increase satisfaction with communication and understanding of dynamic outbreak interventions.

Methods	Process measures	Target for process measure	Comments
During outbreaks a Resident Council Representative will be a member of the outbreak management team. This will allow residents council to have complete, accurate and up to date information on the status of the outbreak and any interventions in place. Daily/weekly written reports will also be provided as the situation may warrant.	% of outbreak meetings attending by a resident representative.	80% of meetings attending during first outbreak 100% of meetings attended during subsequent outbreaks.	

Safety

Measure - Dimension: Safe

Indicator #2	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	16.97	15.00	Extencicare target	Achieva

Change Ideas

Change Idea #1 Weekly unit falls meetings

Methods	Process measures	Target for process measure	Comments
Held on the care units, involving the primary nurses and personal support workers who know the residents care needs, we review residents who the Fall Prevention Team have identified as a high fall risk, or a “Falling Star”, to ensure interventions that are in place are effective and revise them as required.	# of weekly care unit falls meetings held	100% of meetings held consistently by June	

Change Idea #2 Environmental assessment for residents at high risk of falls.

Methods	Process measures	Target for process measure	Comments
Undertaking environmental assessments to determine the need and feasibility of implementing devices such as motion sensing lights/devices, night lights or other environmental interventions.	# of residents at high risk of falls with completed environmental assessment	100% of residents at high risk of falls receiving environmental assessment consistently by June	

Change Idea #3 Physio, Restorative care and nursing rehab assessment of resident at high risk for falls.

Methods	Process measures	Target for process measure	Comments
Assess residents at high risk for falls for physical abilities and any potential improvements through nursing rehabilitation.	# of residents at high risk for falls with completed physio assessments.	100% of residents at high risk for falls with completed physio assessments by June.	

Measure - Dimension: Safe

Indicator #3	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	14.04	14.00	Extencicare target is 17.3%. Laurier Manor continues to strive to maintain better than target results.	Medisystem Pharmacy, Behavioural Supports Ontario

Change Ideas

Change Idea #1 Review new admissions for use of antipsychotic medication and potential for deprescribing.

Methods	Process measures	Target for process measure	Comments
Our Admissions Nurse will review diagnosis and medications with consultant pharmacists and the attending physician, discuss with the residents and/or their families the risks of being on antipsychotics.	% of new admissions assessed for antipsychotic medication use.	100% of new admissions assessed for antipsychotic medication use by June.	

Change Idea #2 Monthly meeting to review status of antipsychotic medication reduction program

Methods	Process measures	Target for process measure	Comments
Monthly meetings held to review the status of the program for maintenance of target.	# of meetings held	12 meetings held by December	

Measure - Dimension: Safe

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents with restraints	C	% / LTC home residents	Other / Q3 2023	1.93	1.50	Laurier Manor is striving to maintain better than Extendicare target of 2.5%.	Achieva

Change Ideas

Change Idea #1 Implement restraint free policy

Methods	Process measures	Target for process measure	Comments
Communication with HCCSS, Resident Council, Family Council, tours and admission applicants that the home is a restraint free facility.	% of stakeholders communicated with regarding restraint free policy	100% of stakeholders communicated with by May	

Measure - Dimension: Safe

Indicator #5	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of LTC residents with worsened ulcers stages 2-4	C	% / LTC home residents	Other / Q3 2023	1.04	1.04	Extencicare target is 2.0%. Laurier Manor is striving to maintain better than target results	3M, NSWOC

Change Ideas

Change Idea #1 Risk screening of residents upon admission and return from hospital.

Methods	Process measures	Target for process measure	Comments
Skin Wellness Associate Nurses in collaboration with the interdisciplinary team will assess the risk of developing ulcers of all new and re-admissions. Preventative measures as required will be implemented to prevent development of skin issues.	% of new admissions assessed for risk % of re-admissions assessed for risk	100% of new admissions being screened by end of June 100% of re-admissions being screened by end of September.	