

Experience

Measure - Dimension: Patient-centred

Indicator #1	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
What percentage of residents would recommend Starwood to Others	C	% / LTC home residents	In house data collection / 2023	79.10	85.00	To meet Extencicare's target.	Prevail

Change Ideas

Change Idea #1 Improve information sharing on continence care products.

Methods	Process measures	Target for process measure	Comments
1. Information pamphlets from continence product supplier to be added to tour and admission packages 2. Continence care product supplier representative to participate in townhall presentation for families	1. 100% of tour and admission packages with continence care product information. 2. # of family townhalls continence care product representative presents	1. 100% of tour and admission packages to have continence care product information by April 30, 2024 2. Continence care product representative presents in family townhall by April 30 2024	

Change Idea #2 Improve satisfaction with variety of served food and beverages.

Methods	Process measures	Target for process measure	Comments
Collecting regular feedback from residents and families through monthly food committee meetings. Including taste testing to review new products and review and collecting of feedback during new menu cycle development	1. # of food committee meetings held. 2. % of new products trialed at food committee before addition to the menu.	1. Food committee meeting held each month to December 2024. 2. 100% of new products trialed at food committee before addition to the menu by May 2024.	

Measure - Dimension: Patient-centred

Indicator #2	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
From our 2023 Resident Satisfaction Survey - If I need help right away, I can get it (eg. when I ring the call bell or ask for help, I don't have to wait long)	C	% / LTC home residents	In-house survey / Dec. 2022 - Nov. 2023	53.70	75.00	the provincial average for our company is 65.4. In striving to improve we wish to be 10 percentage points higher	

Change Ideas

Change Idea #1 The creation of a first responder to call bells through an adjustment of staffing workloads.

Methods	Process measures	Target for process measure	Comments
1. audit the current response time to bells to establish a baseline 2. review and restructuring of PSW and RSA workloads to create first responder position 3. Audit residents weekly to determine satisfaction rate 4. periodic audits of call bell response times to determine if there is an actual or perceived change	# of weekly auditing of call bell response times will be completed by Sept 2024 # of PSW and RSA workloads that were adjusted # of residents audited weekly for satisfaction rate.	Adjustment of staffing workload to improve response to call bells will be implemented by June, 2024.	

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Indicator #3	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
The residents' response to "I have input into the recreation programs available" on the 2024 Resident Satisfaction survey will be 75%	C	% / LTC home residents	In-house survey / December 2023 - November 2024	63.60	75.00	We are currently just under our companies provincial average of 63.9. 11 percentage points is a strong stretch target.	

Change Ideas

Change Idea #1 In addition to the Residents' Council meeting a new Quarterly program development meeting will be set up with the residents to identify any new programs they would like, if the timing of a program needed to change or if the design of a current program needed to change.

Methods	Process measures	Target for process measure	Comments
1. during the Residents' Council Resident Satisfaction Survey Action Plan update council members will be given an opportunity for input into the actions taken and the changes in the programs available. 2. As a balancing measure attention will be given to the At Risk Residents - the ones who do not attend many programs and require individual or small programs 3. programs specifically requested through this forum will be identified on the calendar 4.agenda item will be added to the monthly Residents' Council agenda for an update on the action steps taken toward the goal of greater involvement for the residents.	1.# of new programs implemented quarterly 2. Satisfaction audits conducted on the new programs. The results will be part of the Residents' Council update	Incorporating resident's input into resident's program will be in place by April, 2024.	

Measure - Dimension: Patient-centred

Indicator #4	Type	Unit / Population	Source / Period	Current Performance	Target	Target Justification	External Collaborators
Percentage of family say I would recommend	C	% / Family	In-house survey / 2023	90.20	91.00	Will improve and continue to exceed Extendicare's target of 85%.	

Change Ideas

Change Idea #1 Family have requested more education on understanding the role of the Social Worker, Dietitian and Physiotherapist. Recruitment efforts for volunteers for spiritual care. More information on how incontinence products is chosen for their loved ones.

Methods	Process measures	Target for process measure	Comments
1. Will invite the Social Worker, Dietitian and Physiotherapist to attend a family council meeting. Presentation on how their profession supports residents in Long Term Care. Feedback to the presentation will be encouraged. 2. Program Manager to provide the family council an update on volunteer recruitment specifically to spiritual care. 3. Have a presentation on how an incontinent product is determined best meet the need of a resident. Brochures or pamphlets will be provided and included in tour package as well as the admission package. Feedback to the presentation will be encouraged.	# of positive feedback for both presentation will be evaluated, determine if further education is needed based on feedback. Will be implemented by end of July 2024. Update to each family meeting on volunteers for spiritual care will be implemented by April 2024 Will meet with family council in July to evaluate if the request for the three identified areas are satisfactory.	Will meet families satisfaction on education need and recruitment efforts by July 2024.	

Safety

Measure - Dimension: Safe

Indicator #5	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	16.91	15.00	Extencicare target	Achieva

Change Ideas

Change Idea #1 We have entered into a 1-year trial with Esprit AI monitoring systems. This project is linked to both falls and skin and wound

Methods	Process measures	Target for process measure	Comments
Currently 20 monitoring pads are in place. Use the tool to predict and identify when a resident is likely to get up out of bed. Identify residents who would most benefit from this monitoring system. Link monitoring system into current call bell system.	# of residents utilizing the monitoring system # of residents who had fall reduction from bed with the use of the monitoring system.	There will be a 30% decrease in the number of falls for the monitored residents by Dec. 2024	

Measure - Dimension: Safe

Indicator #6	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	16.08	15.00	To improve current target or exceed Extencicare's target 17.3%.	Medisystem, BSO, Royal Ottawa Hospital-Psychogeriatric team

Change Ideas

Change Idea #1 We will continue to complete medication reviews on all residents on antipsychotics. Attention will continue to be placed on all new admissions including readmissions from the hospital

Methods	Process measures	Target for process measure	Comments
Lead for antipsychotic reduction program will continue to monitor resident who have antipsychotic prescribed. Those without exclusion condition will be a prioritized for review to reduce use of medication.	# of residents prescribed antipsychotics # of residents who have a plan for deprescribing # of new admission and readmission who have prescribed antipsychotics	Medication reviews of antipsychotics will be completed by end of year and meeting targets.	Continue to use Extencicare's monthly tracking tool and program to evaluate resident who would be appropriate to start reducing antipsychotic use. Collaborating with the resident/family, physician, pharmacy and interdisciplinary team.

Measure - Dimension: Safe

Indicator #7	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 a pressure injury that worsened to a stage 2, 3 or 4	C	% / All patients	Other / Q3 (Oct- Dec 2023)	2.30	2.00	Will meet or exceed Extencicare's target	Dietitian, Physiotherapy, 3M

Change Ideas

Change Idea #1 Review high risk residents with the use of the PURS tool for preventative measures of pressure injuries.

Methods	Process measures	Target for process measure	Comments
Wound Care Champion will be responsible for monitoring and communicating identified high risk residents with the interdisciplinary and leadership team, on a weekly basis. Review with the skin and wound committee preventative measures that need to be in place.	# of high risk resident discussed with interdisciplinary on a weekly basis. # of preventative measures put into place.	All high risk residents will be reviewed for preventative measures by April 2024.	

Measure - Dimension: Safe

Indicator #8	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	% / All patients	Other / Q3 (Sept- Dec 2023)	0.58	0.00	Will continue to improve and exceed Extendicare's 2.5% target	Achieva

Change Ideas

Change Idea #1 Discussion with resident and family regarding safety and risk with use of restraints, when requested.

Methods	Process measures	Target for process measure	Comments
1. Lead for this program will meet and provide education to resident/family when a request to have a restraint is being asked. 2. Focus on other restraint alternatives such as music, wellness chair and walking programs.	# of PASD and restraint will be tracked and evaluated each month for appropriateness. # of alternatives use in place of restraints	All request for use of restraint will result in no restraint being applied and maintain target by end of 2024	